

BACKGROUND PAPER FOR The Medical Board of California

**(Oversight Hearing, February 27, 2017, Senate Committee on
Business, Professions and Economic Development and the Assembly
Committee on Business and Professions)**

IDENTIFIED ISSUES, BACKGROUND AND RECOMMENDATIONS REGARDING THE MEDICAL BOARD OF CALIFORNIA

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BRIEF OVERVIEW OF THE MEDICAL BOARD OF CALIFORNIA

History and Function of the Medical Board of California

The Medical Board of California (MBC)'s history dates back to 1876 with the passage of the first Medical Practice Act (Act). In 1901, the Act was completely rewritten and the former California Medical Society Board, the Eclectic Medical Society Board, and the Homeopathic Medical Society Board merged to become the Board of Examinations (Board) comprised of nine members. The membership was increased to 11 in 1907, and in 1913, a revolving fund was created to fund the Board's activities. From 1950 to 1976, the Board expanded its role beyond physician licensing and discipline to oversee various allied health professions. In 1976, significant changes were made to the Act to create MBC much as it exists today, as well as adjustments to MBC's composition. The prior Board's 11 members included only one non-physician member but MBC's membership increased to 19 members, including seven public members. MBC underwent a structural change in 2008 with the elimination of its Division of Licensing and Division of Medical Quality and the establishment of one unified board with membership set at 15.

The current MBC mission statement, as stated in its 2014 Strategic Plan, is as follows:

The mission of the Medical Board of California is to protect health care consumers through the proper licensing and regulation of physicians and surgeons and certain allied health care professions and through the vigorous, objective enforcement of the Medical Practice Act, and to promote access to quality medical care through the Board's licensing and regulatory functions.

Through its licensing program, MBC ensures that only qualified applicants, pursuant to the requirements in the Act and related regulations, receive a license or registration to practice. Via its enforcement program, allegations of wrongdoing are investigated and disciplinary or administrative action is taken as appropriate.

Under the Act, MBC has jurisdiction over physicians licensed by the state as well as special program registrants/organizations and special faculty permits which allow those who are not MBC licensees but meet licensure exemption criteria outlined in the Act to perform duties in specified settings. MBC also has statutory and regulatory authority over licensed midwives, medical assistants, registered polysomnographic trainees, registered polysomnographic technicians, registered polysomnographic technologists, research psychoanalysts and student research psychoanalysts. MBC also approves accreditation agencies that accredit outpatient surgery settings and issues Fictitious Name Permits to physicians practicing under a name other than their own.

MBC is comprised of 15 members: eight physicians and seven public members. All eight professional members and five of the public members are appointed by the Governor. One public member of the Board is appointed by the Senate Committee on Rules and one public member is appointed by the Speaker of the Assembly. Current law requires that four of the physician members hold faculty appointments in a clinical department of an approved medical school in the state, but no more than four members may hold full-time appointments to the faculties of such medical schools. The Board meets

about four times per year. MBC members receive a \$100-a-day per diem. All meetings are subject to the Bagley-Keene Open Meetings Act.

The following is a listing of the current MBC members:

Board Member	Appointment Date	Term Expiration Date	Appointing Authority	Professional or Public
<p>Dev Gnanadev, M.D., President Dr. Gnanadev serves as chair of the Department of Surgery at Arrowhead Regional Medical Center, a position he has held since 1989. He is a clinical professor of surgery at Western University for Health Sciences and an associate professor of surgery at Loma Linda University. He earned his medical degree from the Kurnool Medical College in Kurnool, Andhra Pradesh, India.</p>	December 21, 2011	June 1, 2019	Governor	Professional
<p>Denise Pines, Vice President Ms. Pines is responsible for strategic planning and business development for Denise Pines, Inc. Prior to starting her business over 15 years ago, Ms. Pines held management positions at AT&T, Neiman Marcus, Louis Vuitton, and The Gap. Ms. Pines has a bachelor of science degree in marketing from San Francisco State University, a master's degree in international business from John F. Kennedy University and a master's degree in finance from Stanford University.</p>	August 29, 2012	June 1, 2020	Governor	Public
<p>Ronald Lewis, M.D., Secretary Dr. Lewis has been a physician and surgeon with the California Department of Corrections at Ironwood State Prison since 2008. He also has been an assistant clinical professor at the University of California, San Diego Department of Medicine since 2000. Dr. Lewis earned his Doctor of Medicine degree at The George Washington University in Washington D.C., and is a Fellow of the American College of Physicians.</p>	August 14, 2013	June 1, 2017	Governor	Professional
<p>Michelle Bholat, M.D. Dr. Bholat is Professor and Executive Vice Chair of the Department of Family Medicine at the David Geffen School of Medicine at UCLA. In 2014 she was elected to the Board of the California Beach Cities Health District serving the communities of Hermosa Beach, Manhattan Beach, and Redondo Beach, California. Dr. Bholat earned her medical degree from the University of California Irvine College of Medicine, and her Master of Public Health degree in health care policy and management from UCLA.</p>	February 25, 2015	June 1, 2018	Governor	Professional
<p>Michael Bishop, M.D. Dr. Bishop serves as director of anesthesia for same-day surgery at the University of California, San Diego Medical Center in Hillcrest and held</p>	December 21, 2011	June 1, 2017	Governor	Professional

<p>this position since 2008. He is an attending anesthesiologist and clinical professor of anesthesiology at the University of California, San Diego and serves as quality officer for the Department of Anesthesiology. He received his medical degree from the University of California, San Francisco School of Medicine.</p>				
<p>Judge Katherine Feinstein, J.D. (ret.) Judge Feinstein retired as Presiding Judge of the San Francisco Superior Court after serving 12 years on the bench. As a trial judge, she presided over virtually every type of case to come before a state trial court. Concurrently, she served a four-year term on the Commission on Judicial Performance, the body responsible for the discipline of judges and justices. Judge Feinstein is a Phi Beta Kappa undergraduate of UC Berkeley and received her J.D. from UC Hastings College of the Law.</p>	January 13, 2016	June 1, 2020	Governor	Public
<p>Randy Hawkins, M.D. Dr. Hawkins has been in private practice since 1985. His medical practice is composed of primary care, pulmonary and critical care medicine and hospice care. He is Board Certified in internal medicine and pulmonary and critical care medicine. He is clinical assistant professor of medicine at the Charles Drew University of Medicine and Science. He earned a Doctor of Medicine degree from Hahnemann Medical College in 1979. He completed his pulmonary and critical care fellowship at the University of California at San Diego in 1985.</p>	March 2, 2015	June 1, 2020	Governor	Professional
<p>Howard Krauss, M.D. Dr. Krauss has been in the private practice of ophthalmology in West Los Angeles since 1984. He is also Clinical Professor of Ophthalmology and Neurosurgery at the David Geffen School of Medicine at UCLA, Director of Neurosurgical Ophthalmology for the Saint John's Brain Tumor Program in Santa Monica and Director of Ophthalmology at Pacific Eye & Ear. He holds degrees in Electrical Engineering from The Cooper Union and Aeronautics & Astronautics from MIT. He completed Residency at the UCLA Jules Stein Eye Institute and Fellowship in Neuro-ophthalmology and Orbital Surgery at the University of Pittsburgh. Dr. Krauss earned his medical degree from New York Medical College.</p>	August 14, 2013	June 1, 2017	Governor	Professional
<p>Kristina Lawson, J.D. Ms. Lawson is a partner at Manatt, Phelps and Phillips, LLP in San Francisco, where she practices land use and environmental law. Ms. Lawson earned a J.D. degree from the Santa Clara University School of Law, and a B.A. from the University of Arizona.</p>	October 26, 2015	June 1, 2018	Governor	Public
<p>Sharon Levine, M.D. Dr. Levine is an associate executive director of</p>	February 11, 2009	June 1, 2019	Governor	Professional

<p>The Permanente Medical Group and served as a pediatrician from 1977 to 1991. She was a staff pediatrician for the Georgetown University Community Health Plan; a clinical associate in infant nutrition at the National Institutes of Health; and was the director of pediatric services for Montgomery Georgetown Pediatric Clinic. Dr. Levine earned her medical degree from Tufts University School of Medicine.</p>				
<p>Brenda Sutton-Wills, J.D. Ms. Sutton-Wills is Staff Counsel for the California Teachers Association. She is currently a member of the American Bar Association Employment Rights and Responsibilities Ethics Subcommittee. Ms. Sutton-Wills is a graduate of Drake University, and UCLA School of Law.</p>	April 6, 2016	June 1, 2019	Senate Committee on Rules	Public
<p>David Warmoth Mr. Warmoth has been a consistent campaigner for social and economic justice issues and HIV/AIDS policy. He participated in bringing the first integrated suite of software solutions to market in the early 1980s. Mr. Warmoth attended Miami University and received his B.A. in Political Science – International Relations.</p>	February 29, 2016	June 1, 2019	Speaker of the Assembly	Public
<p>Jamie Wright, J.D. Ms. Wright is an attorney who operates her own practice, handling matters relating to contract drafting and negotiations; contract disputes; general litigation; entertainment transactions; sponsorship agreements; distribution deals; partnership agreements; incorporation for non-profit and for profit entities; reality television agreements; and temporary restraining orders. Ms. Wright is a graduate of UC Berkeley and UC Hastings College of the Law.</p>	August 20, 2013	June 1, 2018	Governor	Public
<p>Felix Yip, M.D. Dr. Yip is a board certified urologist in private practice and is currently the Chief of Surgery at Garfield Medical Center and Pacific Alliance Medical Center. He serves as clinical professor of urology at the Keck School of Medicine - University of Southern California and has served as clinical assistant professor of surgery at UCLA School of Medicine and Western University of Health Sciences in prior years. Dr. Yip earned his medical degree from the University of Wisconsin - Madison, School of Medicine and Public Health, and his M.B.A. in healthcare management from the University of California, Irvine.</p>	June 4, 2014	June 1, 2018	Governor	Professional
<p>Vacant</p>			Governor	Public

MBC performs a great deal of work in committees and currently has six standing committees, five two-member task forces or issue specific committees, two panels and one council that assist with the

MBC's work. MBC committees may meet on an as-needed basis and may meet outside of the cycle of when quarterly MBC meetings are held, offering an easier pathway for interested parties to weigh in on a particular issue. The committee structure also allows committee members to have an expanded discussion on a noteworthy topic and potentially make a decision that moves forward as a formal recommendation to MBC for consideration at a MBC meeting. Pursuant to the MBC's strategic plan, MBC must convene every other year to discuss the purpose of each committee and reevaluate the need for the committees/subcommittees/task forces created by the MBC. The following is a list of MBC entities:

- *Application Review and Special Programs Committee.* Statutorily mandated, the committee evaluates the credentials of certain licensure applicants (such as those claiming postgraduate training hardship or those requesting a waiver from the written licensing exam waiver to determine their eligibility for licensure). The committee also provides guidance, recommendations and expertise regarding special program laws and regulations, specific applications, medical school site visits, and other issues of concern to the chief of licensing.
- *Special Faculty Permit Review Committee.* The purpose of this statutorily mandated committee is to evaluate the credentials of internationally trained physicians sponsored by a California medical school to determine if he or she is academically eminent in his or her field of specialty and should be issued a Special Faculty Permit under Section 2168 of the Business and Professions Code (BPC), which authorizes the physician to practice with all the rights and privileges of a California medical license in the sponsoring medical school and its formally affiliated hospitals. The committee submits a recommendation to MBC for each proposed candidate for final approval or denial.
- *Midwifery Advisory Council.* The Council is statutorily defined in BPC Section 2509 and serves as a formal, permanent body to provide MBC with input from those in the midwifery profession as well as to develop solutions to various regulatory, policy and procedure issues regarding the licensure and regulation of midwives by MBC.
- *Panels A and B.* Panels created under the MBC's statutory authority in BPC 2008 to appoint panels from its members to evaluate appropriate disciplinary actions. Panel A considers actions related to physicians with a last name starting with A-L and Panel B considers actions related to physicians with a last name starting with M-Z.
- *Executive Committee.* The Executive Committee's purpose is to oversee various administrative functions of the MBC such as budgets and personnel, strategic planning and reviewing legislation.
- *Licensing Committee.* The Licensing Committee serves as an expert resource and advisory body to MBC members and the MBC licensing program by educating MBC members and the public on the licensing process.
- *Enforcement Committee.* The Enforcement Committee is an expert resource and advisory body to MBC members and the MBC enforcement program, educating MBC members and the public on enforcement processes. It also serves to identify program improvements in order to enhance protection of healthcare consumers and review enforcement regulations, policies and procedures, and the MBC's Vertical Enforcement and Prosecution Model.

- *Public Outreach, Education and Wellness Committee.* The Public Outreach, Education and Wellness Committee develops informational materials on important issues that MBC, develops and monitors MBC's outreach plan, monitors MBC's strategic communications plan and develops physician wellness information by identifying available activities and resources that renew and balance a physician's personal and professional life.
- *Editorial Committee.* The Editorial Committee reviews MBC's Newsletter articles to ensure they are appropriate for publication and provides any necessary edits to the articles.
- *Marijuana Task Force.* The Marijuana Task Force reviews and updates MBC's guidelines pertaining to the recommendation of marijuana for medicinal purposes, identifies best practices, and performs communication and outreach by engaging all stakeholders in the endeavor.
- *Midwifery Task Force.* The Midwifery Task Force reviews current laws and regulations for licensed midwives and acts as a liaison with the Midwifery Advisory Council on issues that may come before MBC.
- *Prescribing Task Force.* The Prescribing Task Force's aim is to identify ways to proactively approach and find solutions to the epidemic of prescription drug misuse, abuse and overdoses, as well as inappropriate prescribing of prescription drugs, through education, prevention, best practices, communication and outreach.
- *Sunset Review Task Force.* The Sunset Review Task Force meets with MBC's executive director and deputy director to review sunset review questions and responses.
- *Demographic Study Task Force.* Established in January 2017, the Demographic Study Task Force will look into a recent report issued by the California Research Bureau that found some disparities in MBC disciplinary actions. For further information about this task force, see Issue #25 below.

In order to remain current with national trends in medicine, MBC is involved in various national associations and organizations. Several MBC members and the executive director sit on committees for national associations and organizations in order to provide input and perspective from California, given that the state has the largest number of licensed physicians in the nation and the activities and functions of MBC have an impact nationally. MBC is a voting member of the Federation of State Medical Boards, a national nonprofit organization representing the 70 medical and osteopathic boards in the United States territories. MBC is also a member of the Administrators in Medicine, a national not-for-profit organization for state medical and osteopathic board executives. MBC is additionally a member of the Educational Commission for Foreign Medical Graduates (ECFMG), a private, nonprofit organization whose mission is to promote quality health care for the public by certifying international medical graduates for entry into U.S. graduate medical education, and by participating in the evaluation and certification of other physicians and health care professionals nationally and internationally. MBC is also a member of the International Association of Medical Regulatory Authorities, an organization that encourages best practices among medical regulatory authorities worldwide in the achievement of their mandate to protect, promote and maintain the health and safety of the public by ensuring proper standards for the profession of medicine. Additionally, MBC is a

member of the Citizen Advocacy Center whose mission is to increase the accountability and effectiveness of health care regulatory, credentialing, oversight and governing boards by advocating for a significant number of public members, improving the training and effectiveness of public and other board members, developing and advancing positions on relevant administrative and policy issues, providing training and discussion forums, and performing needed clearinghouse functions for public members and other interested parties.

MBC reports that it engages in a number of activities to educate physicians, applicants for licensure, and the public and notes that its website and the information it provides to consumers was recently ranked top in the nation by *Consumer Reports*. MBC provides information regarding its functions, laws and regulations by attending outreach events, providing articles on topics of interest to physicians and the public in the MBC's quarterly newsletter and attending licensing fairs and orientations at medical schools and teaching hospitals. MBC reports that its website is continually updated to reflect upcoming MBC activities, changes in laws or regulations and other relevant information of interest to its stakeholders. Examples include useful links about access to medical records, health information privacy, how to choose a physician and the MBC's enforcement process, to name a few. Frequently Asked Questions on numerous topics for both the public and licensees are also on MBC's website, including, but not limited to, medical assistants, cosmetic treatments, MBC's complaint process and internet prescribing and practice. Licensees are also now able to renew their license to practice medicine, apply for a license and update survey and contact information through MBC's website.

Agendas for all MBC and committee meetings are posted to MBC's website at least 10 days prior to meetings, including links to background materials and pertinent information contained in meeting packets.

MBC states that it distributes information to the public in a timely manner using several methods, including: a subscription service through its website to send subscriber alerts to interested parties; Twitter and social media; and direct emails to licensee and applicant email addresses that contain pertinent updates that may impact the licensee's practice or license, or requires the licensee to take a certain action.

MBC provides information about past and current licensees, including the license number, license type, name of the licensee or registrant (as it appears in MBC's records), the licensee address of record, the status of a license, the original date a license was issued, the date a license expires and the name of the school the licensee graduated from and the year of graduation. MBC also collects information from licensees that it makes available, including the licensee's activities in medicine, primary and secondary practice location zip code, telemedicine primary and secondary practice location zip code, training status, board certifications, primary practice area(s), secondary practice area(s), post graduate training years, and voluntary information regarding ethnic background, foreign language(s) and gender.

In 2015, MBC launched an outreach campaign entitled "Check Up On Your Doctor's License" designed to encourage all California patients to check up on their doctor's license using MBC's website. MBC estimates that the campaign has the potential of reaching 17 million California health care consumers and reports that the MBC saw an increase in its web hits and placement in Google, Yahoo, and Bing web search analytics.

MBC attempts to webcast all of its meetings and most of its committee meetings live, however it relies on DCA staff to do this. When DCA staff is not available to webcast a meeting, the meeting is filmed

and subsequently posted on MBC’s website. In addition to webcasting, which provides the public a way to view MBC meetings, MBC allows the public to listen and comment at most of its meetings via telephone. Interested parties are provided a call-in number via a MBC meeting agenda and can call that number to listen to a meeting as well as provide comments on any agenda item.

Fiscal, Fund and Fee Analysis

MBC is a special fund agency whose activities are funded through regulatory fees and license fees. At the end of FY 2015/16, MBC reports that it had a reserve balance of 5.1 months which is about \$27 million but projects to have a fund reserve of 3.6 months at the end of FY 2016/17 and 2.2 months at the end of FY 2017/18. MBC is required by law to maintain a reserve of two to four months. MBC provided a \$6 million loan to the General Fund in FY 2008/09 and a \$9 million loan to the General Fund in 2011/12. \$6 million of the \$15 million General Fund loan money is scheduled to be repaid in FY 2016/17.

The following is the past, current and projected fund condition for MBC:

Fund Condition (Contingent Fund of the MBC)						
(Dollars in Thousands)	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
Beginning Balance ¹	24,574	26,732	28,666	28,369	27,001	19,327
Revenues and Transfers	52,895	56,404	54,563	56,816	55,619	56,591
Total Revenue	\$77,469	\$83,136	\$83,229	\$85,185	\$82,628	\$75,918
Budget Authority	55,922	59,014	60,439	62,064	63,293	64,480
Expenditures ²	50,970	54,983	55,142	58,184	63,293	64,480
Loans to General Fund	0	0	0	0	0	0
Accrued Interest, Loans to General Fund	0	0	0	0	0	0
Loans Repaid From General Fund	0	0	0	0	³	³
Fund Balance	\$26,499	\$28,153	\$28,087	\$27,001	\$19,327	\$11,438
Months in Reserve	5.4	5.8	5.4	5.1	3.6	2.2

¹ Beginning balance is the Adjusted Beginning Balance of the Fund Condition Statement which includes the prior year adjustment and fund assessment adjustments.

² Expenditures are net of the state operations, scheduled and unscheduled reimbursements, and statewide assessments. FYs 2016/2017 and 2017/2018 expenditures (and revenues) are projections.

³ The Board is scheduled to receive loan repayments of \$6 million in FY 2016/2017 and \$9 million in FY 2017/2018. However, as of the printing of this document no funds have been received by the Board. Should the \$6 million be repaid in FY 2016/2017 as scheduled, the Board’s fund condition would be 4.8 months reserve at the end of FY 2016/2017.

MBC’s primary source of revenue, accounting for 82 percent of the money MBC brings in, is physician license renewal fees. Both the fees for the allied health programs regulated by MBC and physician license renewal fee have remained the same since MBC’s last review in 2012-13. MBC raised the initial physician and surgeon licensure fees, as well as those renewal fees, in 2006, the first increase since 1994, in order to support MBC’s Vertical Enforcement/Prosecution model. Fees were decreased in 2008 when MBC eliminated its Diversion Program. Renewal fees were increased by \$12 in 2014, pursuant to SB 809 (DeSaulnier, Chapter 400, Statutes of 2013) which provided ongoing funding for California’s Controlled Substances Utilization Review and Evaluation System (CURES) Prescription Drug Monitoring Program (PDMP) through health professional licensing fees. MBC

collects the fee and transfers the \$12 per renewed licensee to the Department of Justice (DOJ) which maintains the CURES system.

Effective January 1, 2007, the physician's initial licensure and renewal fees were increased by \$15 to \$805, based upon the average amount of cost recovery that MBC had received in the prior three fiscal years that would no longer be received by MBC due to its statutory inability to recover enforcement costs from licensees facing disciplinary action. This topic is discussed further in Issue #14 below.

Fee Schedule and Revenue <i>(dollars in thousands)</i>							
Fee	Current Fee Amount	Statutory Limit	FY 2012/2013 Revenue	FY 2013/2014 Revenue	FY 2014/2015 Revenue	FY 2015/2016 Revenue	% of Total Revenue
CONTINGENT FUND OF THE MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS ONLY							
Application Fee (BPC § 2435)	442.00	442.00	3,014	3,080	3,124	3,516	6.20%
Initial License Fee (BPC § 2435) (16 CCR 1351.5)	783.00	790.00	1,546	1,672	1,706	1,881	3.32%
Initial License Fee (Reduced) (BPC § 2435)	391.50	395.00	1,471	1,625	1,590	1,751	3.09%
Biennial Renewal Fee (BPC § 2435) (16 CCR 1352)	783.00	790.00	45,740	48,638	46,962	48,478	85.51%

According to MBC, enforcement accounts for 73 percent of expenditures, licensing accounts for 14 percent of MBC's budget, MBC's Information System Branch (ISB) represents 6 percent and Administration represents 7 percent of expenditures.

Expenditures by Program Component <i>(dollars in thousands)</i>								
	FY 2012/2013		FY 2013/2014		FY 2014/2015		FY 2015/2016	
	Personnel Services	OE&E						
Enforcement	15,850	21,357	17,434	23,224	5,615	19,317	6,088	18,780
Examination	0	0	0	0	0	0	0	0
Licensing	3,635	2,098	3,861	2,224	3,863	2,214	4,184	2,925
Administration ¹	4,101	1,823	3,888	1,734	3,965	1,560	4,170	1,911
DCA Pro Rata ²	0	4,318	0	4,968	0	21,399	0	22,827
Diversion (N/A)	0	0	0	0	0	0	0	0
TOTALS ³	\$23,586	\$29,596	\$25,183	\$32,150	\$13,443	\$44,490	\$14,442	\$46,443

¹ Administration includes costs for executive staff, board, administrative support, and fiscal services.

² In FY 2014/2015, Pro Rata includes Health Quality Investigation Unit expenditures of \$16,313,540. In FY 2015/2016, the amount was \$16,335,960.

³ Totals exclude both scheduled and unscheduled reimbursements.

MBC is one of 40 entities within the Department of Consumer Affairs (DCA). Through its divisions, the DCA provides centralized administrative services to all boards, committees, commission and bureaus which are funded through a pro rata calculation that appears to be based on the number of authorized staff positions for an entity rather than actual number of employees. MBC paid DCA over

\$16 million in Pro Rata for FY 2015/16. MBC attributes this steep increase to the transfer of its Health Quality Investigation Unit (HQIU) to the DCA's Division of Investigation (DOI) in 2014, following the passage of SB 304 (Lieu, Chapter 515, Statutes of 2013) which provided the statutory direction for this transfer. The HQIU and MBC resources utilized to support this unit is discussed further in Issue # 27 below.

Staffing Levels

MBC is currently authorized in the Governor's 2017/18 budget for a total of 170.9 (160.6 permanent/full-time and 10.3 temporary help) positions. MBC has also submitted two budget change proposals (BCPs), one requesting two permanent positions for its enforcement program to address increased complaints MBC attributes to growth in the number of insured Californians receiving services as patients of physicians and another to fund one permanent position dedicated to implementation of a physician health and wellness program (discussed further in Issue #29 below).

MBC states that it has been successful in both recruiting and retaining employees in each of its programs, which is reflected in MBC's low vacancy rates over the past four years. MBC works with the DCA Office of Human Resources to reclassify its positions when necessary in order to ensure the efficient utilization of resources, enhancement of operations and to further facilitate MBC's mission statement, objectives, and goals. In FY 2015/2016, MBC had a four percent vacancy rate. MBC is currently awaiting the results from a DCA review of inspectors to determine if positions warrant reclassification and recently some call center positions to address the increased complexity of assignments, levels of responsibility and consequences involved and the need for staff oversight and professional development.

MBC attempts to use existing resources to ensure staff succession planning, including transferring knowledge from a departing staff member to another through training. MBC uses Individual Development Plans to set reasonable goals for employees, assess job-related strengths and aid in the development of employees to reach career goals resulting in both improved employee and organizational performance. MBC also focuses on staff training and development through onsite training and workshops.

Licensing

MBC's licensing program ensures licenses or registrations are only issued to applicants who meet legal and regulatory requirements and who are not precluded from licensure based on past incidents or activities. MBC currently has 141,967 physician and surgeon licensees, a 6.8 percent increase since the last sunset review. Over the past four years, MBC received over 27,618 new physician and surgeon applications, issued over 23,160 physician and surgeon licenses, and renewed over 260,992 physician and surgeon licenses.

In addition to physicians, MBC licenses and/or issues registrations or permits for special faculty at medical schools, special programs, licensed midwives, research psychoanalysts and student research psychoanalysts, polysomnographic trainees, technicians and technologists and out-of-state physicians participating in a sponsored free health care event. (MBC's regulation of other allied health professionals is discussed below.) MBC also has responsibility for other approvals and permits. MBC has a process to determine if an international medical school will be recognized by the board, since a condition of eligibility as a licensed physician in California is that all applicants must have received all of their medical school education from, and graduated from, a MBC recognized medical school, or

have met other specified conditions. MBC approves outpatient setting accreditation agencies that accredit specific types of outpatient surgery centers that many licensed physicians use when performing surgical procedures. MBC also evaluates physician specialty boards that are not affiliated with, or certified by, the American Board of Medical Specialties (ABMS) but believe they have equivalent requirements (this issue is discussed further in Issue #11 below). MBC also issues Fictitious Name Permits that allow physicians to practice medicine under a name other than their own.

MBC identifies applicants who indicate they are military service veterans or spouses through submission of documentation proving military status. MBC has received 75 new physician applications for waivers from professional license renewal fees and continuing education requirements for military reservists called to active duty pursuant to BPC Section 114.3 and 83 physician applications that qualified for the expedited license available to military spouses and domestic partners of a military member who is on active duty in California pursuant to BPC Section 115.5.

MBC approves all medical schools attended by applicants for licensure as a physician, unless the applicant meets the exception in BPC 2135.7. MBC relies on a standardized evaluation by a nationally recognized entity, Liaison Committee on Medical Education (LCME) in approving U.S. and Canadian medical schools. As noted above and discussed further in Issue #16 below, international medical schools undergo an independent MBC evaluation process.

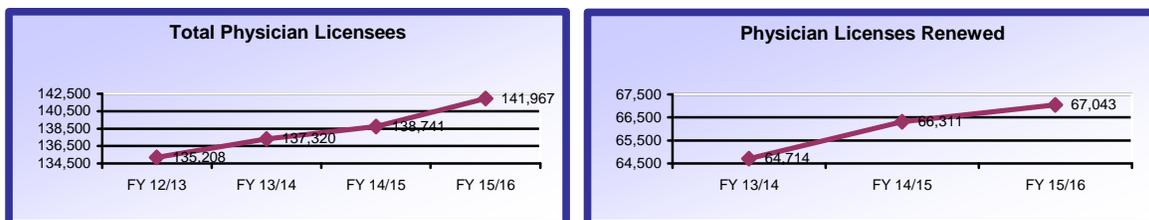
Physician applicants for licensure by MBC must pass nationally recognized examinations, the United States Medical Licensing Examination (USMLE) Step 1, Step 2 Clinical Skills (CS), Step 2 Clinical Knowledge (CK) and Step 3. The examination encompasses basic sciences, medical knowledge, patient diagnosis and treatment as well as practical knowledge by testing core areas of medicine, surgery, psychiatry, obstetrics/gynecology, pediatrics and family medicine. Examinations are offered throughout the world on an ongoing basis, although USMLE Step 2 CS does not require a California-specific examination. USMLE Step 2 CS and Step 3 are offered only in the US and are offered as computer-based and mock patient-based. Applicants are eligible for USMLE Steps 1 and 2 CK and 2 CS upon satisfactory completion of specific basic science curriculum coursework. At the time of eligibility, the applicant participates in and completes the application process, ultimately gaining admittance to the examinations. Once the scores are released and the applicant has passed Step 1 and Steps 2 CK and CS, the applicant continues with their medical education. The applicant is eligible for Step 3 immediately upon graduation from medical school. However, as this examination is practical and clinical based, many graduates prefer to complete at least one year of postgraduate training prior to attempting the Step 3 examination. Per USMLE requirements, applicants must complete the entire examination series, Steps 1 through 3, within seven years from the date of the first passing examination.

MBC requires documents to be sent directly from medical schools, postgraduate training programs, other state medical boards and others to MBC as means of gauging proof of attendance, completion, licensure in another state and other evidence that is necessary to consider for licensure. MBC notes that approximately 88-90 percent of the applications it receives and reviews are deficient at the time of review.

All applicants must obtain fingerprint criminal record checks from both the Department of Justice and the Federal Bureau of Investigation prior to the issuance of a physician's medical license in California. If applicants respond yes to a series of questions on the application related to issues during postgraduate training, unusual circumstances during medical school, discipline or convictions, the applicant is able to provide narrative information to MBC and MBC requires that documentation

supporting the applicant’s assertion be provided directly to MBC. MBC also requires documentation to be provided directly to the board for proof of residency from medical education providers and previous medical licensure from the licensing agency. MBC queries the National Practitioner Databank, a confidential information clearinghouse created by Congress to improve health care quality, protect the public, and reduce health care fraud and abuse in the U.S., for certain applicants with issues of concern disclosed on the application or during the application process as well as applicants who disclose that he or she holds a license in another state, territory or province. MBC also queries all applicants in the FSMB database, which contains a record of disciplinary actions taken by other states and jurisdictions, as well as any inappropriate behavior in another state or jurisdiction during an examination. MBC does not recognize true reciprocity in that applicants for licensure in California must still adhere to certain medical school education requirements not present in all other states or jurisdictions.

MBC reports that it continues to see an increase in the number of physicians in California as well as an increase in the number of renewals it processes as highlighted below.



MBC is currently meeting the requirement set forth in regulations for applicants to receive notification within 60 days of receipt as to whether the application is complete and accepted for licensure or if it is deficient and what specific information or documentation is required to complete the application. As MBC has seen a 23 percent increase in applications between FY 2013/2014 and FY 2015/2016, and staffing levels for application review and processing has stayed the same, it was not able to meet its Strategic Plan goal of 45-day initial application review and 7-day pending mail review for over half of FY 2015/16. While MBC has met these goals in FY 2016/17, delays are attributed to the initial deployment of BreZE, discussed further in Issue #1 below.

Continuing Medical Education (CME)

Physicians are required to complete no less than 50 hours of approved CME during each two year period immediately preceding the expiration date of his or her license. The only exception to this requirement is for a physician who takes and passes a certifying or recertifying examination administered by a recognized specialty board; the individual can be granted credit for four consecutive years of CME credit for purposes of licensure renewal. Upon renewal, physicians are required to self-certify under penalty of perjury that they have met each of the CME requirements, that they have met the conditions exempting them from all or part of the requirements, or that they hold a permanent CME waiver. MBC is authorized to audit a random sample of physicians who have reported compliance with the CME requirements for verification purposes. MBC reports that it currently audits approximately one percent of the total number of renewing physicians per year. (Recent challenges with CME audits are discussed further in Issues #1 below.) Approved CME consists of courses or programs designated by the American Medical Association or the Institute for Medical Quality/California Medical Association related to patient care, community health or public health, preventive medicine, quality assurance or improvement, risk management, health facility standards, the legal aspects of clinical

medicine, bioethics, professional ethics or improvement of the physician-patient relationship. Through its committees, MBC has discussed CME and procedures for performing CME audits, including the Maintenance of Licensure/Certification issue as proposed by the FSMB which would require more in-depth and specific continuing education than the current CME required.

Enforcement

MBC's enforcement activities are the core of its program, with the majority of its staff and resources dedicated to enforcement functions. Over the last three years, MBC:

- Investigated and closed 23,152 investigations
- Referred 1,401 cases to OAG for action
- Filed 960 accusations and/or petitions to revoke probation
- Obtained 211 suspension/restriction orders
- Revoked or accepted the surrender of 394 licenses
- Placed 441 licensees on probation
- Issued 283 public reprimands/public letters of reprimand.

The enforcement process begins with a complaint. Complaints are received from the public, generated internally by MBC or based on information MBC receives from various entities through mandatory reports to MBC (mandatory reporting to MBC is discussed further in Issue # 20 below). On average, MBC receives about 8,000 complaints per fiscal year and reports that it has witnessed an increase in the number of complaints every year since the prior review of MBC. Complaints are received by MBC's Central Complaint Unit which starts the process of determining next steps for a complaint. Complaints that pertain to treatment provided by a physician requires that patient medical records are obtained. Pursuant to BPC Section 2220.08, before a quality of care complaint is referred for further investigation, it must be reviewed by one or more medical experts with the pertinent education, training, and expertise to evaluate the specific standards of care issues raised by the complaint to determine if further field investigation is required. MBC is required by law (BPC Section 129) to open a complaint within ten days of receipt and further required by law (BPC Section 2319) to set a goal of no more than 180 days between the time a complaint is received and the complaint is investigated. MBC is not meeting either of these requirements and reports that in FY 2015/16, the overall average time MBC took to investigate a complaint was 230 days. Complaints are discussed further in Issue #26 below.

For complaints that are subsequently investigated and meet the necessary legal prerequisites, a Deputy Attorney General (DAG) in the Office of the Attorney General (OAG) drafts formal charges, known as an "Accusation". An accusation is filed upon signature of the MBC executive director. A hearing before an Administrative Law Judge (ALJ) is subsequently scheduled, at which point settlement negotiations take place between the DAG, physician and his or her attorney and MBC staff. Often times these result in a stipulated settlement, similar to a plea bargain in criminal court, where a licensee admits to have violated charges set forth in the

accusation and accepts penalties for those violations. If a licensee contests charges, the case is heard before an ALJ who subsequently drafts a proposed decision. This decision is reviewed by a panel of MBC members who either adopt the decision as proposed, adopt the decision with a reduced penalty or adopt the decision with an increased penalty. If probation is ordered, a copy of the final decision is referred to MBC’s Probation Unit for assignment to an inspector who monitors the licensees for compliance with the terms of probation.

Following the 2004 release of a statutorily mandated report by an independent enforcement program monitor, MBC implemented a vertical prosecution model, or MBC’s Vertical Enforcement Prosecution (VE). VE required DAGs to be involved in MBC’s investigation activities as well as its prosecution activities (DAGs serve as the attorneys of record to DCA licensing boards and are responsible for initiating and taking legal steps for administrative disciplinary action against the holder of a professional license). Through VE, DAGs and HQUI investigators are jointly assigned to an investigation from the outset. This team approach is intended to encourage early coordination and faster decisions, filings, and results given that true VE allows a prosecutor to learn a case as it is being built and in theory allows the DAG to assist in securing medical records, physician interviews, select expert witness and other critical elements of a successful case. VE differs from the process used by other boards under DCA – other boards (other boards does not include boards MBC contracts with for enforcement related efforts) typically conduct investigations with their own enforcement staff or DOI and then forward those investigations and cases to DAGs for appropriate administrative filings. The initial report by the enforcement monitor (Monitor’s Report) called for MBC investigators to be transferred from MBC to OAG’s Health Quality Enforcement (HQE) section which prosecutes MBC cases. As noted above, SB 304 of 2013 transferred MBC’s peace officer investigators, medical consultants and other support staff to a new HQUI within DCA’s DOI. VE is discussed further in Issue #27.

The Board uses its Manual of Model Disciplinary Orders and Disciplinary Guidelines (Disciplinary Guidelines, 16 CCR section 1361) and the Uniform Standards for Substance-Abusing Licensees (Uniform Standards, 16 CCR section 1361.5) as the framework for determining the appropriate penalty for charges filed against a physician. BPC Section 2229 identifies that protection of the public shall be the highest priority for MBC, but also requires that wherever possible, the actions should be calculated to aid in the rehabilitation of the licensee. While the Disciplinary Guidelines and Uniform Standards frame the recommended penalty, the facts of each individual case may support a deviation from the guidelines.

MBC reports that there has been an increase in actions taken by MBC since the prior review, including a 28 percent increase in the number of license revocations and surrenders and a ten percent increase in the number of licensees placed on probation. MBC states that the overall average number of days to complete a disciplinary action has decreased over the last three fiscal years by five percent.

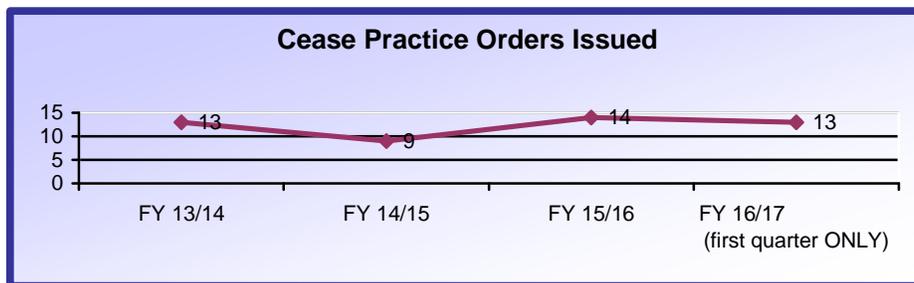
Fiscal Year	Prior Sunset Review Report			Three Year Average	Current Sunset Review Report			Three Year Average
	09/10	10/11	11/12		13/14	14/15	15/16	
Suspension/ Restriction Order Issued	62	69	78	70	74	52	85	70
*Revocation and Surrender	105	84	117	102	128	130	136	131

*Probation and Probation with Suspension	127	121	153	134	152	146	143	147
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Despite these numbers, it still takes MBC years to complete the enforcement process and the numbers of cases that do result in disciplinary action are not proportional to the large amount of complaints MBC receives. In FY 2014/2015, 309 investigations conducted by non-sworn investigators were closed or referred to OAG for further administrative filings, resulting in average of 102 days to close an investigation. In FY 2015/2016, 391 investigations were closed or referred to OAG for further administrative filings, resulting in an increased average of 124 days to close an investigation. MBC also reports that there have been improvements in the time it takes to obtain an Interim Suspension Order (ISO) as well as the number of ISOs issued.

Suspension/Restriction Type	Issued FY 14/15	Issued FY 15/16	Average Days FY 14/15	Average Days FY 15/16
Stipulated Agreements	0	0	0	0
Automatic Suspension Orders	4	0	293	0
Cease Practice Orders	9	14	N/A	N/A
Interim Suspension Orders	14	37	588	438
Out-of-State Suspension Orders	11	18	71	82
Penal Code section 23/Court Orders	14	16	179	192
TOTAL	52	85		

MBC’s Probation Unit works to ensure that physicians who are not compliant with probationary orders have swift action taken against their license by either issuing a citation and fine, issuing an order for the individual to cease practicing or referring the case to OAG. Management in this unit has worked to provide additional training to staff and MBC’s disciplinary guidelines were amended to include language allowing MBC to issue a cease practice order for probationers not in compliance with terms of his or her probation.



As review of a case by a medical expert is an important piece of MBC’s investigation, MBC works to ensure it successfully recruits these individuals and properly trains the expert reviewer physicians who assist with enforcement. MBC recently launched a recruitment plan to increase the number of physicians who serve as expert reviewers, including enhancements to MBC’s website and newsletter, creating a brochure that highlights the important aspects of being an effective expert, advertising to potential new experts in various other newsletters and magazines and developing a video about expert review. MBC also offers full day training for expert reviewers, providing an overview of the complaint and field investigation process, legal considerations when providing an opinion, a discussion of real case scenarios to provide an understanding of the difference between extreme and simple

departures from the standard of care, report writing and tips to provide effective testimony during a hearing.

MBC also works to ensure that ALJs who hear MBC disciplinary actions are trained by MBC on topics of anatomy and systems of the body, prescribing practices, medical record keeping, and co-morbid patients.

MBC issues citations to licensees for technical violations of the Act like failing to comply with advertising statutes or failing to report a change of address. MBC reports that it increasingly issues citations for violations identified during the course of an investigation that do not rise to the level to support disciplinary action. In these situations, MBC may require a licensee to complete some education related to a citation, like additional courses in medical record keeping if improper records were the reason a licensee was cited.

Allied Health Professions Regulated by MBC

- *Licensed Midwives.* MBC received regulatory authority over licensed midwives in 1994 and, although other allied health professions later developed their own regulatory boards, MBC continues to have jurisdiction over licensed midwives. A licensed midwife (LM) is an individual who has been issued a license to practice midwifery by MBC. The Midwifery Practice Act, contained in BPC Sections 2505 to 2521 authorizes a licensee to attend cases of normal pregnancy and childbirth and to provide prenatal, intrapartum, and postpartum care, including family-planning care, for the mother and immediate care for the newborn. LMs can practice in a home, birthing clinic or hospital environment.

Pathways to licensure for LMs include completion of a three-year postsecondary education program in an accredited school approved by MBC or through a challenge mechanism. BPC Section 2513(a)-(c) allows a midwifery student and prospective applicant the opportunity to obtain credit by examination for previous midwifery education and clinical experience. Prior to licensure, all midwives must take and pass the North American Registry of Midwives (NARM) examination, adopted by MBC in 1996, which satisfies the written examination requirements set forth in law.

MBC receives guidance on midwifery issues through a Midwifery Advisory Council (MAC). The MAC is made up of LMs (pursuant to BPC 2509, at least half of the MAC members are LMs), a physician, and two non-physician public members. MBC is working with stakeholders through the MAC and a specified task force in order to define “normal” in regulations, for purposes of clarifying birth that an LM can attend, as required under AB 1308 (Bonilla, Chapter 665, Statutes of 2013).

MBC administers a LM Fund into which LM licensing fees are deposited, and from which MBC received an appropriation in FY 2014/15 to manage the Midwifery Program. LM applicants submit an initial license fee of \$300 and a biennial renewal fee of \$200. This renewal fee accounts for over 80 percent of the LM Fund revenue.

MBC reports that it is meeting its requirement to inform LM applicants within 30 days of receipt of an application as to whether the application is complete and accepted for filing or is deficient and what specific information is required. MBC reports that licensing processing times are consistent with those during the prior sunset review of MBC. MBC follows a process

that mirrors that of physician and surgeon licensees in terms of determining the appropriate educational and training qualification (as reflected through materials received directly from entities verifying this information) and also the proper background checks for LM applicants.

MBC approves LM schools and reports that there are currently 11 approved schools. MBC is reviewing how continued approval of schools could be undertaken to ensure approved schools maintain the same standards over time as when they were originally approved by MBC.

MBC reports that disciplinary actions filed against LMs are small, proportionate with the small LM population. According to MBC, there have been three actions filed over the past three years and MBC uses its disciplinary guidelines for LMs. MBC is in the process of promulgating regulations to allow MBC to issue citations and collect fines for unlicensed midwifery activity. LMs are discussed further in Issue #4 below.

- *Polysomnographic Trainees, Technicians and Technologists.* Polysomnography is the treatment, management, diagnostic testing, control, education and care of patients with sleep and wake disorders. Polysomnography includes, but is not limited to, the process of analysis, monitoring, and recording of physiologic data during sleep and wakefulness to assist in the treatment of disorders, syndromes, and dysfunctions that are sleep-related, manifest during sleep or disrupt normal sleep activities.

MBC administers a Polysomnographic Program (PP) which registers individuals involved in the treatment, management, diagnostic testing, control, education and care of patients with sleep and wake disorders. The PP registers individuals as polysomnographic trainees, technicians or technologists.

Polysomnographic Trainee (Trainee) registration is required for individuals under the direct supervision of a supervising physician, polysomnographic technologist or other licensed health care professionals who provide basic supportive services as part of their education program, including, but not limited to, gathering and verifying patient information, testing preparation and monitoring, documenting routine observations, data acquisition and scoring and assisting with appropriate interventions for patient safety in California. In order to qualify as a Trainee, one must have either a high school diploma or have passed the California General Educational Development Test (GED) and received a California High School Equivalency Certificate. Trainees must also complete at least six months of supervised direct polysomnographic patient care experience or be enrolled in a polysomnographic education program approved by MBC. At the time of application, Trainee applicants must also possess a current certificate in basic life support issued by the American Heart Association.

Polysomnographic Technician (Technician) registration is required for individuals who may perform the services equivalent to that of a Trainee under general supervision and may implement appropriate interventions necessary for patient safety in California. In order to qualify for registration as a Technician, an individual must meet the initial requirements for a Trainee and have at least six months experience at Trainee level.

Polysomnographic Technologist (Technologist) registration is required for individuals who, under the supervision of a physician, are responsible for the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders in California. Registrants are required to have a valid, current credential as a Technologist issued by the

National Board of Registered Polysomnographic Technologists; are required to have graduated from a polysomnographic educational program that has been approved by MBC; and required to have taken and passed the Board of Registered Polysomnographic Technologist examination given by the Board of Registered Polysomnographic Technologists.

MBC reports that the number of PP applicants has remained constant. MBC reports that it is meeting internal goals of applications to the PP within 30 days. As with LMs, MBC follows a process that mirrors that of physician and surgeon licensees in terms of determining the appropriate educational and training qualification (as reflected through materials received directly from entities verifying this information) and also the proper background checks for PP applicants.

According to MBC, there have been no disciplinary actions taken over the past three years, but an accusation has been filed against a PP registrant. Like LMs, MBC is in the process of promulgating regulations to allow MBC to issue citations and collect fines for unlicensed activity.

- *Research Psychoanalysts.* A registered research psychoanalyst (RP) is an individual who has graduated from an approved psychoanalytic institution and is registered with MBC. Students currently enrolled in an approved psychoanalytic institution and register with MBC as a Student RP, and as such, are authorized to engage in psychoanalysis under supervision. BPC Sections 2529 and 2529.5 authorize individuals who have graduated from an approved psychoanalytic institute to engage in psychoanalysis as an adjunct to teaching, training, or research and hold themselves out to the public as psychoanalysts and requires these individuals to register with MBC. An RP may engage in psychoanalysis as an adjunct to teaching, training or research. “Adjunct” means that the RP may not render psychoanalytic services on a fee-for-service basis for more than an average of one-third of his or her total professional time, including time spent in practice, teaching, training or research. Students and graduates are not entitled to state or imply that they are licensed to practice psychology, nor may they hold themselves out by any title or description of services incorporating the words: psychological, psychologist, psychology, psychometrists, psychometrics or psychometry.

As with LMs and those under the PP, MBC follows a process to determine the appropriate educational and training qualification (as reflected through materials received directly from entities verifying this information) and also the proper background checks for applicants for RP registration. Additional information related to the RP registration program can be found in Issue #3 below.

- *Medical Assistants.* Medical assisting professions have been highlighted as some of the fastest growing employment categories by entities like the United States Bureau of Labor Statistics. Medical assistants (MA) are unlicensed personnel who work in health care practitioner offices and are authorized under BPC Section 2069 to administer medication (only by intradermal, subcutaneous, or intramuscular injections), perform skin tests and perform basic administrative, clerical and technical supportive services when conditions regarding supervision, training, specific authorization and records are met.

A MA must receive training either directly from a physician, surgeon, podiatrist, registered nurse, licensed vocational nurse, physician assistant or a qualified MA. Alternatively, a MA may receive training from a secondary, postsecondary or adult education program in a public

school authorized by the Department of Education, in a community college program, or a postsecondary institution accredited by an accreditation agency recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary Education.

While medical assistants are not required to be licensed or register with MBC like other allied health professionals within MBC's jurisdiction, they may be certified by a national certifying body

MAs can be supervised by physicians, podiatrists or optometrists. Additionally, they may work under the direct supervision of a physician assistant, nurse practitioner or nurse midwife when the supervising physician or surgeon is not on site, only if the physician or surgeon has created a written protocol for the activities of the MA. MAs must receive specific authorization before providing any technical services. This authorization may be in the form of a specific written order or standing order prepared by the supervising physician or podiatrist. The order must include an authorization for the procedure to be performed and it must be noted in the patient's medical record.

MAs are required to document all technical supportive services in the patient's record. In addition, when practicing under the supervision of a physician assistant, nurse practitioner or nurse midwife, the delegation of supervision from the physician or podiatrist to the physician assistant, nurse practitioner or nurse midwife, must be documented in a written standard protocol.

While MBC does not formally oversee MAs as licensees or registrants, the Act specifies that MAs must be at least 18 years old and meet minimum training as outlined in standards established by MBC. MBC does approve certifying organizations that provide certification to medical assistants. According to MBC, there are currently four approved certifying organizations, two of which are recognized by the National Commission for Certifying Agencies: the American Association of MAs, who provide Certified MA certification the American Medical Technologists who provide Registered MA certification.

(For more detailed information regarding the responsibilities, operation and functions of the Board please refer to MBC's "Sunset Review Report 2016." This report is available on its website at http://www.mbc.ca.gov/Publications/Sunset_Report/sunset_report_2016.pdf

PRIOR SUNSET REVIEW: CHANGES AND IMPROVEMENTS

MBC was last reviewed by the Legislature through sunset review in 2012-13. During the previous sunset review, 39 issues were raised. In December 2016, MBC submitted its required sunset report to the Senate Committee on Business, Professions and Economic Development and Assembly Committee on Business and Professions (Committees). In this report, MBC described actions it has taken since its prior review to address the recommendations made. The following are some of the more important programmatic and operational changes, enhancements and other important policy decisions or regulatory changes made. For those which were not addressed and which may still be of concern to the Committees, they are addressed and more fully discussed under “Current Sunset Review Issues.”

- **MBC tries to be proactive in ensuring consumer protection as advances in technology become more prevalent.** MBC reports that it actively investigates complaints regarding inappropriate online practice and telehealth and that these types of complaints follow the same investigative and prosecutorial process as all other complaints MBC receives. MBC notes that there has been an increase in the number of complaints regarding the use of telehealth, including the online aspect of telehealth and advises that as technology advances, MBC tries to remain aware of situations where physicians are not complying with telehealth laws and not following the standard of care in providing services to patients, including physicians in other states providing services to California patients without having a California license. MBC staff attends conferences regarding telehealth practices and communicates regularly with other state regulatory boards to develop best practices regarding telehealth with increased innovation and options for patients to interact with physicians.
- **Physicians licensed in other states can participate in sponsored health care events.** In order to better serve California patients who do not receive basic health, vision, and dental care screenings, free health events, staffed by volunteer health professionals are put on in the state, often sponsored by government agencies. MBC was the first health board to promulgate regulations to implement legislation authorizing licensed professionals from other states to provide services at these free events and continues to play a part in helping to avoid shortages of health professionals at these events.
- **A clear path to licensure by MBC for graduates of accelerated medical programs is in place, one step in reducing California’s shortage of physicians.** MBC sponsored legislation to establish a pathway for physicians who have already graduated from accredited accelerated programs in other states, as well as new California graduates, to be licensed to practice in California by recognizing the potential unintended consequences of a four-year school statutory requirements. MBC’s efforts allow students to save money in school costs and are consistent with recent national trends in medical education while still preserving the quality of medical school education.
- **MBC receives email addresses from physicians who have email addresses, thus is better able to provide timely and important electronic communications to its licensees.**
- **MBC can more easily disclose a licensee’s postgraduate training on his or her BreEZe profile.** MBC and the Committees did not agree during the prior review about the consumer benefit for postgraduate training to be disclosed to the public, however MBC is now working to

ensure that this information, of value to patients and public, will be displayed on a licensee's online profile.

- **MBC is issuing citations and collecting fines from physicians who fail to produce records and the timeframe for a health facility and physician to provide these important materials are now in sync at 15 days.** The Committees were concerned that MBC may not be using its authority to take action against physicians who do not provide medical records, a key tool in MBC's effective investigation of complaints. MBC is now citing individuals who do not comply with the requirement to turn records over to MBC within 15 days after receipt of the Board's request for these records to be released. Discrepancies between the requirements for facility record production and physician record production have been removed, with both now required to provide medical records to MBC within 15 days.
- **CURES is now funded and MBC utilizes the system proactively.** The Committees were concerned about adequate funding for California's CURES PDMP system as well as whether MBC was effectively using the system to assist in efforts to combat the epidemic of prescription drug abuse and overdose deaths throughout the state. MBC states that it studies CURES data to identify physicians who may be inappropriately prescribing controlled substances. Physician and surgeon licensing fees have helped provide a stable funding source for the system.
- **MBC is issuing licenses to physicians who attended foreign medical schools and have been practicing in other states for a number of years.** The Committees requested MBC provide information about its implementation of SB 122 (Price, Chapter 789, Statutes of 2012) which authorized MBC applicants who attended or graduated from a school MBC did not recognize or had not approved to be eligible for licensure if the individual has continuously practiced for a certain period of time. MBC has issued a total of 20 licenses under these provisions and has a process for consideration of these applicants.
- **The Registered Dispensing Optician (RDO) Program was transferred to the State Board of Optometry.** The Committees recommended that MBC initiate discussions to transfer the RDO Program; the program was transferred to the State Board of Optometry through 2015 legislation (AB 684, Alejo, Chapter 405, Statutes of 2015), eliminating consumer confusion.
- **MBC sponsored or provided technical assistance on legislation aimed at enhancing consumer protection. MBC has also been responsive to legislative efforts that impact its work.** Since the prior review, there have been over 25 bills that directly impact MBC, the Act and MBC operations. MBC has implemented key legislation, worked with Legislative stakeholders on legislation and provided important input as legislation moves through the process, including major legislation that impacts physicians like the End of Life Option Act (ABX2 15, Eggman, Chapter 1), which, until January 1, 2026, allows a mentally competent adult patient with a terminal disease to ask for and receive a prescription from his or her physician to hasten death according to specified criteria or 2013 legislation (SB 670, Steinberg, Chapter 399, Statutes of 2013) which provided MBC the ability to obtain a deceased patient's medical records from a physician without the consent of the patient's next of kin or a court order in any case that involves the death of a patient to more swiftly investigate cases.

CURRENT SUNSET REVIEW ISSUES

The following are unresolved issues pertaining to the Medical Board of California or areas of concern that should be considered, along with background information for each issue. There are also recommendations Committee staff have made regarding particular issues or problem areas MBC needs to address. MBC and other interested parties have been provided with this Background Paper and MBC will respond to the issues presented and the recommendations of staff.

MBC ADMINISTRATION ISSUES

ISSUE #1: (BreEZe.) MBC transitioned to BreEZe in October 2013 as one of the first entities at DCA utilizing the new system. MBC has faced challenges in meeting timeline goals and implementing processes and has paid vast sums of money for the project, in addition to countless hours of staff resources. What is the status of BreEZe? How many of MBC's service requests are still pending? Does BreEZe track enforcement statistics in a meaningful way for MBC?

Background: The DCA has been working since 2009 on replacing multiple antiquated standalone IT systems with one fully integrated system. In September 2011, the DCA awarded Accenture LLC with a contract to develop and implement a commercial off-the-shelf customized IT system, which it calls BreEZe. BreEZe is intended to provide applicant tracking, licensing, renewals, enforcement, monitoring, cashiering, and data management capabilities. In addition, BreEZe is web-enabled and designed to allow licensees to complete and submit applications, renewals, and the necessary fees through the internet. The public also will be able to file complaints, access complaint status, and check licensee information if/when the program is fully operational.

The project plan called for BreEZe to be implemented in three releases. The first release was scheduled for July 2012 but delayed until late 2013. MBC transitioned to BreEZe during Release One in October 2013. MBC reports that since 2013, there have been 118 releases that included major, minor, and emergency service request changes, which have been implemented. Unlike many other entities at DCA, MBC is fortunate to have its own Information System Branch (ISB) which is able to work with the DCA Office of Information Services and vendor analysts and developers to define, prioritize, test, and implement service requests for MBC.

MBC reports that once the system went live, MBC's Consumer Information Unit received requests for BreEZe support from applicants, licensees and consumers, leading to ISB's internal technical support Help Desk to also provide technical support for BreEZe online users. In FY 2013/2014, the ISB Help Desk received 14,403 public support requests via phone or email; in FY 2014/2015, 16,678 requests; and in FY 2015/2016, 17,353 requests.

Like other DCA entities transitioning to the new BreEZe system, MBC staff adjusted to new business processes and requirements which delayed timeframes. Licensing processing timelines grew as the initial deployment of BreEZe resulted in a need for all business processes to be reviewed. Changes were required for staff activity as well as the BreEZe system itself, all of which impacted every facet of processing of applications, from the receipt of initial fees and application forms through the final issuance of a license. MBC reports that staff is now trained and more comfortable with the system and new business processes and timeframes have since stabilized.

MBC's ability to access monthly caseload reports and track complaint processing and enforcement timelines was significantly impacted by BreEZe. Staff at MBC's Central Complaint Unit were not able to receive these reports, an important tool for MBC to effectively monitor the progress and timeframe for cases.

MBC CME audits have also been impacted by BreEZe. The prior tools utilized to automate the process for CME auditing and tracking CME audit information for a licensee were not initially available in BreEZe, resulting in MBC's inability to perform CME audits. MBC did not conduct **any** CME audits until May 2016 when the system change went into effect.

MBC reports that ISB and other MBC staff are working on requests for system updates to further streamline the processes for applicants, licensees, consumers and staff and to make more transactions available online.

It would be helpful for the Committees to understand the continuing cost impacts of BreEZe to MBC's budget as well as the status of requests for technical fixes and larger change improvements.

Staff Recommendation: *MBC should advise the Committees how much it is projected to pay in BreEZe costs for FY 2017/18. MBC should update the Committees on the number of pending tickets and how swiftly MBC requests for system upgrades and changes are being processed. MBC should advise the Committees of any major updates anticipated based on the passage of recent legislation.*

ISSUE #2: (DATA SHARING WITH OTHER STATE AGENCIES.) Data collected by other state agencies impacts MBC's knowledge of its licensee population. MBC is supposed to receive data from a number of state agencies yet does not always receive the information necessary for MBC to do its job. What is the status of MBC's efforts to obtain important data from other state agencies?

Background: Various state agencies collect and receive health related data that may be connected to activities of MBC licensees. For example, the Department of Public Health (DPH) Office of Vital Records maintains certificates for vital events in California, including death certificates. The Department of Health Care Services (DHCS) and Department of Social Services (DSS) work together to track psychotropic medication prescription data for children in foster care. DPH's Laboratory Field Services program is supposed to inspect and subsequently track information related to the outcome of inspections of laboratories.

In each of these instances, MBC's work may be improved by having access to data from other agencies. For example, MBC could gauge prescribing trends for certain populations and conditions if it has timely access to psychotropic medication prescriptions for foster youth. With data, MBC can both set guidelines and advise on best practices as well as take enforcement action when necessary in events of demonstrated overprescribing. MBC's receipt of death certificates for deaths involving prescription drug overdose, could similarly allow MBC to assess trends that may inform best practices for controlled substances prescribing, or lead MBC to conduct investigations in instances where a death could be connected to the prescribing by an MBC licensee. If MBC received timely information from DPH about laboratories providing inducements to physicians, it would be better positioned to take action against those licensees violating Business and Professions Code Section 650 which prohibits these activities.

While MBC does have data use agreements with some agencies for information, there have historically been delays in MBC receiving information that could in turn allow MBC to make administrative decisions to inform its licensees of best practices or in some cases, allow MBC to take important enforcement action.

It would be helpful for the Committees to understand what state agencies MBC could benefit from receiving data from, what state agencies MBC has data use agreements with and where challenges persist for MBC to gain often critical information about the role of its licensees.

Staff Recommendation: *MBC should advise the Committees of its data sharing efforts and relationships with other state agencies. MBC should provide information to the Committees about necessary statutory changes that would enhance MBC's ability to safely and securely access data related to its licensees.*

ISSUE #3: (RESEARCH PSYCHOANALYST REGISTRATION.) As noted previously, MBC registers Research Psychoanalysts (RPs), individuals who practice psychoanalysis for fees for no more than one third of the individual's total professional time (which includes time spent in practice, teaching, training or research). Psychoanalysis is a discipline of psychology. Why does MBC administer the RP registration program rather than the Board of Psychology which oversees those practicing in psychology and has experience administering registration programs?

Background: According to the American Psychological Association (APA), psychoanalysis is a specialty in psychology that is distinguished from other specialties by its body of knowledge and its intensive treatment approaches. It aims at structural changes and modifications of a person's personality. Psychoanalysis promotes awareness of unconscious, maladaptive and habitually recurrent patterns of emotion and behavior, allowing previously unconscious aspects of the self to become integrated and promoting optimal functioning, healing and creative expression. The APA states that psychoanalytic training typically requires four to eight years of advanced study after completion of a doctoral degree in psychology acceptable to the American Board of Professional Psychology and further requires specialized training at free-standing psychoanalytic institutes, postdoctoral university programs, or an equivalent training secured independently that is acceptable to the American Board and Academy of Psychoanalysis.

In California, the Board of Psychology licenses psychologists and registers psychologists and psychological assistants. Licensed psychologists may practice independently in any private or public setting. Psychological assistants are those individuals who have an advanced degree in psychology and provide limited psychological services under direct supervision. Registered psychologists are authorized to engage in psychological activities under direct supervision only at nonprofit community agencies that receive a minimum of 25 percent of their funding from a governmental source.

The Board of Psychology previously had a member who served as president of the Northern California Society for the Psychoanalytic Psychology Board of Directors and was an assistant editor for a psychoanalytic publication. It appears that the Board of Psychology may have more expertise in this discipline and may be a more appropriate entity to register RPs who engage in a psychology based practice.

Staff Recommendation: *MBC should advise the Committees why it registers RPs rather than the Board of Psychology. Upon receipt of information from MBC and the Board of Psychology, the*

Committees may wish to transfer registration of RPs to the Board of Psychology, which already successfully administers registration programs for individuals practicing psychology.

ISSUE #4: (LICENSED MIDWIVES.) MBC regulates licensed midwives. Are certain clarifications to the law necessary to reflect these providers' role? How does MBC work with LMs and LM stakeholder groups?

Background: MBC received regulatory authority over licensed midwives in 1994. A licensed midwife (LM) is an individual who has been issued a license to practice midwifery by MBC. The Midwifery Practice Act, contained in BPC Sections 2505 to 2521, authorizes a licensee to attend cases of normal pregnancy and childbirth and to provide prenatal, intrapartum, and postpartum care, including family-planning care, for the mother and immediate care for the newborn. LMs can practice in a home, birthing clinic or hospital environment.

MBC receives guidance on midwifery issues through a Midwifery Advisory Council (MAC). The MAC is made up of LMs (pursuant to BPC 2509, at least half of the MAC members are LMs), a physician, and two non-physician public members. MBC is working with stakeholders through the MAC and a specified task force in order to define "normal" in regulations, for purposes of clarifying births an LM can attend, as required under AB 1308. Until MBC adopts regulations, LMs are not able to be a "comprehensive perinatal provider" for purposes of providing comprehensive perinatal services to Medi-Cal beneficiaries in the Comprehensive Perinatal Services Program (CPSP). SB 407 (Morrell, Chapter 313, Statutes of 2015) authorized a health care provider to employ or contract with licensed midwives for the purpose of providing comprehensive perinatal services in the CPSP.

Certain areas of the law have been identified as potentially benefitting from amendments to better reflect the role of LMs.

Professional Corporations. Corporations Code 13401.5 authorizes the formation of various healing arts professional corporations and establishes which healing arts licensees who are not of the same license type as the corporation may be shareholders, officers, and directors of that corporation. Any person licensed under the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act may be employed by these professional corporations. Thus, the services of professional corporations are not limited to the named profession. For example, a nursing corporation may have a director who is a chiropractor, a shareholder who is an acupuncturist, and employ an accountant, podiatrist, and a marriage and family therapist, none of which would traditionally be seen as providing the professional services of nursing.

Current law authorizes a medical corporation to have a number of health licensees as officers, directors, and shareholders. *LMs should be added to the list.*

Peer Review. Under BPC Section 805, specified health-related professional societies, duly-appointed committees of a medical specialty society, duly-appointed committees of a state or local health related professional society or duly-appointed members of a committee of a professional staff of a licensed hospital that undertakes peer review, must provide reports to the MBC or other state licensing board under certain circumstances. LMs are not currently included in this requirement and should be added. Existing law also provides that there shall be no monetary liability on the part of, and no cause of action for damages shall arise against, specified health professional societies, members of a duly appointed committee of a medical specialty society, or any member of a duly appointed committee of a

state or local health professional society, or duly appointed member of a committee of a professional staff of a licensed hospital for acts performed within the scope of the functions of peer review.

Existing law also provides that the proceedings and actions of specified health professional societies, committees of a medical specialty society or other health professional society, or a committee of the professional staff of a licensed hospital, that have responsibility for the evaluation and improvement of the quality of care provided by the members of the professional society, are not subject to discovery in civil actions. Likewise, persons in attendance at any meeting of any such committee cannot be compelled to testify regarding what transpired at the meeting. *LM professional societies and LM review committees are not included and should be added. Peer review provisions should include LMs.*

Staff Recommendation: *The Committees should amend provisions in the law as noted above.*

MBC should advise the Committees on outreach efforts to LMs and LM stakeholders and should update the Committees on the ongoing relationship between MBC and LMs. MBC should provide an update to the Committees on the AB 1308 regulations, as delays in promulgating these regulations impact the implementation of SB 407 and ability for LMs to provide services under the CPSP.

ISSUE #5: (BOARD OF PODIATRIC MEDICINE [BPM].) While the BPM was once housed within the MBC, it has been a board since 1986 and relies on the MBC only for contractually specified duties, which the MBC provides for other boards as well. The BPM is independently responsible for determining the eligibility of its licensees and making final disciplinary decisions. Should statutory clarifications be made to reflect the actual nature of MBC and BPM's relationship?

Background: MBC provides certain services to other entities at the DCA that were formerly committees under MBC. MBC provides shared services for the BPM and the Physician Assistant Board, smaller programs that do not have near the infrastructure and administrative wherewithal that a large board like MBC does, in order to assist these boards in efficiently conducting their business. Confusion has arisen as to the exact nature of MBC's role with regards to BPM operations as outlined in BPM presentations and discussions at its public meetings.

Through shared services agreements, MBC solely performs administrative functions for independent boards like BPM. In essence, MBC is contracted to do certain work and MBC in turn charges BPM for the time MBC staff work on behalf of BPM to do tasks like processing complaints and handling other disciplinary functions.

When the Podiatry Examining Committee was first created under MBC, terminology describing the relationship between the two entities, as well as the relationship itself was entirely different. In 1980, BPC Section 2460 "created within the jurisdiction of the Division of Allied Health Professions of the Board of Medical Quality Assurance, a Podiatry Examining Committee." BPC 2460 today reads that there is "created within the jurisdiction of the Medical Board of California the California Board of Podiatric Medicine." It appears that the Act has not always been updated to reflect changes in both the relationship, as well as terminology of these two entities, but rather has only been amended over the years to acknowledge changed names of the two entities and sunset dates and extensions.

Historically, MBC issued certificates to practice podiatric medicine to qualified applicants because the committee was under MBC's jurisdiction. The only changes to BPC 2479 related to the issuance of certificates (since the codes were restructured in 1980 and Article 22 related to Podiatric Medicine was

placed where it is in the Act) reflect MBC internal reorganization, specifically that that MBC's Division of Licensing issues licenses on MBC's behalf instead of prior language that referred to MBC. This code section does not appear to have been updated at all to reflect the creation of BPM as a board in 1986. The Act defines "podiatric medicine" as all medical treatment of the foot, ankle, and tendons that insert into the foot, including diagnosis, surgery, and the nonsurgical treatment of the muscles and tendons of the leg governing the functions of the foot. Therefore, a DPM's scope of practice is similar to that of a physician and surgeon who specializes in the foot and ankle. However, unlike a physician and surgeon, whose scope is only limited by the licensee's own area of competence, a DPM's scope is statutorily limited to the foot and ankle.

BPM determines the qualifications for licensure, reviews applications and subsequently makes all decisions about DPM licensure and until 2016, issued its own licenses to its own licensees. However, for these licensees, the actual pieces of paper included a Medical Board of California seal, despite being separate from the licenses issued by MBC for physicians and surgeons due to the lack of proper code cleanup recognizing BPM as an independent entity. Once this proposal was discussed and concerns were raised it was determined that MBC staff, again through a shared services agreement, would update the BreZE system to issue a DPM license on behalf of BPM. MBC does nothing more than update the system to reflect the independent licensure decision made by BPM. For instance, existing law specifies that the MBC issues the podiatric medicine license.

MBC has requested, and legislation was proposed last year (SB 1039, Hill), to clarify that BPM is its own board that performs its own licensing functions so that the law accurately reflects the true nature of each independent entity and each board's actual responsibilities. In response to concerns raised by the BPM, California Podiatric Medical Association and California Medical Association, SB 1039 was amended in the Assembly to remove the provisions related to BPM. CPMA advised the Committees this year that any changes stemming from those conversations last year should continue to place BPM in the Act. CPMA also noted that "there are various rules, regulations and codes that refer to 'licensees of the Medical Board', which have included DPM licensees...CPMA would ask that any new laws consider this and address wording to include DPMs where appropriate."

It does not appear that technical statutory changes to the Act will impact the two boards' shared services agreement, as that is separate from statute and clarifies the contractual services MBC provides to BPM. Further, it does not appear that any code cleanup will impact either of the boards' role in effectively operating, nor does it appear that additional cost will arise from changes to the Act, since the administrative shared services agreement delineates the services MBC provides on behalf of BPM and specifically outlines the cost to BPM for those services.

Staff Recommendation: *The Act should be amended according to the following below, in addition to other code sections identified that clarify the nature of DPM licensure by BPM:*

BPC 2423. (a) Notwithstanding Section 2422:

- (1) All physician and surgeon's ~~certificates, certificates to practice podiatric medicine, registrations of spectacle lens dispensers and contact lens dispensers,~~ **certificates** and certificates to practice midwifery shall expire at 12 midnight on the last day of the birth month of the licensee during the second year of a two-year term if not renewed.
- (2) Registrations of dispensing opticians will expire at midnight on the last day of the month in which the license was issued during the second year of a two-year term if not renewed.

(b) The ~~Division of Licensing~~ **board** shall establish by regulation procedures for the administration of a birth date renewal program, including, but not limited to, the establishment of a system of staggered license expiration dates such that a relatively equal number of licenses expire monthly.

(c) To renew an unexpired license, the licensee shall, on or before the dates on which it would otherwise expire, apply for renewal on a form prescribed by the licensing authority and pay the prescribed renewal fee.

2460. (a) There is created within the ~~jurisdiction of the Medical Board of California~~ the **Department of Consumer Affairs** a California Board of Podiatric Medicine.

(b) This section shall remain in effect only until January 1, 2017, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.

Notwithstanding any other provision of law, the repeal of this section renders the California Board of Podiatric Medicine subject to review by the appropriate policy committees of the Legislature.

2461. As used in this article:

(a) ~~“Division” means the Division of Licensing of the Medical Board of California.~~

(b)

(a) **“Board”** means the California Board of Podiatric Medicine.

(c)

(b) **“Podiatric licensing authority”** refers to any officer, board, commission, committee, or department of another state that may issue a license to practice podiatric medicine.

2475. Unless otherwise provided by law, no postgraduate trainee, intern, resident postdoctoral fellow, or instructor may engage in the practice of podiatric medicine, or receive compensation therefor, or offer to engage in the practice of podiatric medicine unless he or she holds a valid, unrevoked, and unsuspended certificate to practice podiatric medicine issued by the ~~division.~~ **board**. However, a graduate of an approved college or school of podiatric medicine upon whom the degree doctor of podiatric medicine has been conferred, who is issued a resident’s license, which may be renewed annually for up to eight years for this purpose by the ~~division upon recommendation of the board,~~ and who is enrolled in a postgraduate training program approved by the board, may engage in the practice of podiatric medicine whenever and wherever required as a part of that program and may receive compensation for that practice under the following conditions:

(a) A graduate with a resident’s license in an approved internship, residency, or fellowship program may participate in training rotations outside the scope of podiatric medicine, under the supervision of a physician and surgeon who holds a medical doctor or doctor of osteopathy degree wherever and whenever required as a part of the training program, and may receive compensation for that practice. If the graduate fails to receive a license to practice podiatric medicine under this chapter within three years from the commencement of the postgraduate training, all privileges and exemptions under this section shall automatically cease.

(b) Hospitals functioning as a part of the teaching program of an approved college or school of podiatric medicine in this state may exchange instructors or resident or assistant resident doctors of podiatric medicine with another approved college or school of podiatric medicine not located in this state, or those hospitals may appoint a graduate of an approved school as such a resident for purposes of postgraduate training. Those instructors and residents may practice and be compensated as provided in this section, but that practice and compensation shall be for a period not to exceed two years.

2479. ~~The division shall issue, upon the recommendation of the board,~~ ***board shall issue*** a certificate to practice podiatric medicine to each applicant who meets the requirements of this chapter. Every applicant for a certificate to practice podiatric medicine shall comply with the provisions of Article 4 (commencing with Section 2080) which are not specifically applicable to applicants for a physician's and surgeon's certificate, in addition to the provisions of this article.

2486.

~~The Medical Board of California shall issue, upon the recommendation of the board,~~ ***board shall issue*** a certificate to practice podiatric medicine if the applicant has submitted directly to the board from the credentialing organizations verification that he or she meets all of the following requirements:

- (a) The applicant has graduated from an approved school or college of podiatric medicine and meets the requirements of Section 2483.
- (b) The applicant, within the past 10 years, has passed parts I, II, and III of the examination administered by the National Board of Podiatric Medical Examiners of the United States or has passed a written examination that is recognized by the board to be the equivalent in content to the examination administered by the National Board of Podiatric Medical Examiners of the United States.
- (c) The applicant has satisfactorily completed the postgraduate training required by Section 2484.
- (d) The applicant has passed within the past 10 years any oral and practical examination that may be required of all applicants by the board to ascertain clinical competence.
- (e) The applicant has committed no acts or crimes constituting grounds for denial of a certificate under Division 1.5 (commencing with Section 475).
- (f) The board determines that no disciplinary action has been taken against the applicant by any podiatric licensing authority and that the applicant has not been the subject of adverse judgments or settlements resulting from the practice of podiatric medicine that the board determines constitutes evidence of a pattern of negligence or incompetence.
- (g) A disciplinary databank report regarding the applicant is received by the board from the Federation of Podiatric Medical Boards.

2488. Notwithstanding any other ~~provision of law,~~ ~~the Medical Board of California shall issue, upon the recommendation of the board,~~ ***board shall issue*** a certificate to practice podiatric medicine by credentialing if the applicant has submitted directly to the board from the credentialing organizations verification that he or she is licensed as a doctor of podiatric medicine in any other state and meets all of the following requirements:

- (a) The applicant has graduated from an approved school or college of podiatric medicine.
- (b) The applicant, within the past 10 years, has passed either part III of the examination administered by the National Board of Podiatric Medical Examiners of the United States or a written examination that is recognized by the board to be the equivalent in content to the examination administered by the National Board of Podiatric Medical Examiners of the United States.
- (c) The applicant has satisfactorily completed a postgraduate training program approved by the Council on Podiatric Medical Education.
- (d) The applicant, within the past 10 years, has passed any oral and practical examination that may be required of all applicants by the board to ascertain clinical competence.
- (e) The applicant has committed no acts or crimes constituting grounds for denial of a certificate under Division 1.5 (commencing with Section 475).
- (f) The board determines that no disciplinary action has been taken against the applicant by any podiatric licensing authority and that the applicant has not been the subject of adverse judgments or settlements resulting from the practice of podiatric medicine that the board determines constitutes evidence of a pattern of negligence or incompetence.

(g) A disciplinary databank report regarding the applicant is received by the board from the Federation of Podiatric Medical Boards.

2492. (a) The board shall examine every applicant for a certificate to practice podiatric medicine to ensure a minimum of entry-level competence at the time and place designated by the board in its discretion, but at least twice a year.

(b) Unless the applicant meets the requirements of Section 2486, applicants shall be required to have taken and passed the examination administered by the National Board of Podiatric Medical Examiners.

(c) The board may appoint qualified persons to give the whole or any portion of any examination as provided in this article, who shall be designated as examination commissioners. The board may fix the compensation of those persons subject to the provisions of applicable state laws and regulations.

(d) The provisions of Article 9 (commencing with Section 2170) shall apply to examinations administered by the board except where those provisions are in conflict with or inconsistent with the provisions of this article. ~~In respect to applicants under this article any references to the “Division of Licensing” or “division” shall be deemed to apply to the board.~~

2499. There is in the State Treasury the Board of Podiatric Medicine Fund. Notwithstanding Section 2445, the ~~division~~ **board** shall report to the Controller at the beginning of each calendar month for the month preceding the amount and source of all revenue received by ~~it on behalf of~~ the board, pursuant to this chapter, and shall pay the entire amount thereof to the Treasurer for deposit into the fund. All revenue received by the board ~~and the division~~ from fees authorized to be charged relating to the practice of podiatric medicine shall be deposited in the fund as provided in this section, and shall be used to carry out the provisions of this chapter relating to the regulation of the practice of podiatric medicine.

Section 2499.7 is added to the Business and Professions Code, to read:

2499.7. (a) Certificates to practice podiatric medicine shall expire at 12 midnight on the last day of the birth month of the licensee during the second year of a two-year term.

(b) To renew an unexpired certificate, the licensee, on or before the date on which the certificate would otherwise expire, shall apply for renewal on a form prescribed by the board and pay the prescribed renewal fee.

ISSUE #6: (PANEL MEMBERSHIP.) MBC is authorized to create panels pursuant to BPC 2008 to evaluate appropriate disciplinary actions. The structure of these panels is potentially hindered by a statutory prohibition for the MBC president to serve as a panel member unless MBC has a vacancy, while at the same time providing that the number of physicians on a panel cannot outweigh the number of public members. Should the law be clarified to account for the realities of MBC membership?

Background: MBC is comprised of 15 members, eight physicians and seven public members. In addition, BPC Section 2004(c) states that MBC’s responsibilities include carrying out the disciplinary actions appropriate to the findings made by a panel or an administrative law judge. BPC Section 2008 authorizes MBC to establish panels to fulfill section 2004(c). In establishing panels, the law specifies that the panel must be comprised of a minimum of four members, with the number of public members not to exceed the number of licensed physician and surgeon members, but that the MBC president can only be a member of a panel if there is a vacancy in MBC membership.

According to MBC, this inability for the MBC president to serve on a panel has caused a conflict. Depending on the MBC's appointed membership at any given time, the number of individuals on a panel could vary from four to seven. When all MBC members have been appointed, MBC should have two panels, each comprised of seven members. However, if the MBC president happens to be a physician member, and the president is prohibited from sitting on a panel, the result is more public members than physician members, also specifically prohibited under the law. One resolution could be to prohibit a public member from serving on a panel during the tenure of a physician MBC president. However, eliminating the physician member from eligibility as a panel member due to their appointment as president then leaves only seven physicians and seven public members to be divided between two panels. One panel could be made up of four physicians and four public members, but the other panel would be made up of four public members and three physicians, thus violating of the requirement in BPC 2008 that the number of public members not exceed the number of physician members on a panel.

Staff Recommendation: *The Act should be amended to allow the MBC president to be on a panel to resolve this unintended conflict according to the following:*

BPC 2008. The board may appoint panels from its members for the purpose of fulfilling the obligations established in subdivision (c) of Section 2004. Any panel appointed under this section shall at no time be comprised of less than four members and the number of public members assigned to the panel shall not exceed the number of licensed physician and surgeon members assigned to the panel. ~~The president of the board shall not be a member of any panel unless there is a vacancy in the membership of the board.~~ Each panel shall annually elect a chair and a vice chair.

ISSUE #7: (ROLE OF MBC AND HEALTH PROFESSIONALS AND EDUCATION FOUNDATION [HPEF].) MBC has always played a formal role in the administration of the Steven M. Thompson Physician Corps Loan Repayment Program but currently does not have authority to appoint members to the board of the HPEF. Should MBC once again be able to appoint members to the board of the entity that administers this important program?

Background: The Steven M. Thompson Physician Corps Loan Repayment Program (Program) exists within the Health Professions Education Fund, administered by the Office of Statewide Health Planning and Development (OSHPD), as a means of providing educational loans repayment for physicians and surgeons who practice in medically underserved areas of the state. The program was established through legislation in 2002, (AB 982, Firebaugh, Chapter 1131, Statutes of 2002) in response to the physician shortage problem in underserved areas. The program encourages recently licensed physicians to practice in health professional shortage areas (HPSA) in California, repaying up to \$105,000 in educational loans in exchange for full-time service for at least three years. To be considered eligible for an award, applicants must:

- Be an allopathic or osteopathic physician
- Be free of any contractual service obligations (i.e. the National Health Service Corps Federal Loan Repayment Program or other financial incentive programs)
- Have outstanding educational debt from a government or commercial lending institution
- Have a valid, unrestricted license to practice medicine in California
- Be employed or have accepted employment in a HPSA in California and commit to providing full-time direct patient care in a HPSA.

Currently, up to 20 percent of the available Program funds may be awarded to program applicants from specialties outside of the primary care specialties.

The Program was previously housed at MBC until legislation in 2005 (AB 920, Aghazarian, Chapter 317, Statutes 2005) moved the Program to the Health Professions and Education Foundation (HPEF), a 501(c)(3) public benefit corporation, which receives administrative support from OSHPD. Since 1990, HPEF has administered statewide scholarship and loan repayment programs for a wide range of health-profession students and recent graduates and is funded through grants and contributions from public and private agencies, hospitals, health plans, foundations, corporations, and individuals, as well as through a surcharge on the renewal fees of various health professionals. This transfer helped the Program seek donations and secure funding through writing grants and enabled it to grow and increase access to care for Californians.

Although the Program moved to the HPEF, AB 920 also required that two members of the HPEF Board be appointed by MBC. However, that bill also provided a sunset date of January 1, 2011 for the provision related to MBC appointees. AB 1767 (Hill, Chapter 451, Statutes of 2010) extended the date for MBC to appoint members to the HPEF from January 1, 2011, to January 1, 2016, but there was no subsequent legislation to extend the sunset date from January 1, 2016. As a result, MBC's HPEF appointees were removed effective January 1, 2016.

MBC believes that representation on the HPEF is still necessary, noting that physician licensees each provide a mandatory \$25 to the HPEF to fund the program and the assistance MBC staff provides in the award process.

Staff Recommendation: *The Health and Safety Code statutes governing the Program should be amended to ensure participating by MBC in the Program according to the following:*

HSC 128335. (a) The office shall establish a nonprofit public benefit corporation, to be known as the Health Professions Education Foundation, that shall be governed by a board consisting of nine members appointed by the Governor, one member appointed by the Speaker of the Assembly, and one member appointed by the Senate Committee on Rules **and two members appointed by the Medical Board of California.** The members of the foundation board appointed by the Governor, Speaker of the Assembly, and Senate Committee on Rules may include representatives of minority groups which are underrepresented in the health professions, persons employed as health professionals, and other appropriate members of health or related professions. All persons considered for appointment shall have an interest in health programs, an interest in health educational opportunities for underrepresented groups, and the ability and desire to solicit funds for the purposes of this article as determined by the appointing power. The chairperson of the commission shall also be a nonvoting, ex officio member of the board.

(b) The Governor shall appoint the president of the board of trustees from among those members appointed by the Governor, the Speaker of the Assembly, ~~and~~ the Senate Committee on Rules, and **Medical Board of California.**

(c) The director, after consultation with the president of the board, may appoint a council of advisers comprised of up to nine members. The council shall advise the director and the board on technical matters and programmatic issues related to the Health Professions Education Foundation Program.

(d) Members of the board and members of the council shall serve without compensation but shall be reimbursed for any actual and necessary expenses incurred in connection with their duties as members of the board or the council. **Members appointed by the Medical Board of California shall serve**

without compensation, but shall be reimbursed by the Medical Board of California for any actual and necessary expenses incurred in connection with their duties as members of the foundation board.

(e) The foundation shall be subject to the Nonprofit Public Benefit Corporation Law (Part 2 (commencing with Section 5110) of Division 2 of Title 2 of the Corporations Code), except that if there is a conflict with this article and the Nonprofit Public Benefit Corporation Law (Part 2 (commencing with Section 5110) of Division 2 of Title 2 of the Corporations Code), this article shall prevail.

(f) This section shall become operative January 1, 2016.

ISSUE #8: (NOTICE TO CONSUMERS.) Business and Professions Code Section 138 requires DCA entities to adopt regulations requiring licensees to provide notice to consumers that the individual is licensed by the State of California. MBC is concerned that this notification does not accurately represent information consumers may need. Should the notification be expanded?

Background: Pursuant to legislation passed in 1998 (SB 2238, Senate Committee on Business and Professions, Chapter 879, Statutes of 1998), DCA entities were required to promulgate regulations outlining how licensees should provide notice to consumers that the individual is licensed. BPC Section 138 states:

138. Every board in the department, as defined in Section 22, shall initiate the process of adopting regulations on or before June 30, 1999, to require its licentiates, as defined in Section 23.8, to provide notice to their clients or customers that the practitioner is licensed by this state. A board shall be exempt from the requirement to adopt regulations pursuant to this section if the board has in place, in statute or regulation, a requirement that provides for consumer notice of a practitioner's status as a licensee of this state.

MBC advises that the regulations it adopted only reflect this limited notification that an individual is licensed and notes in its Sunset Report “that consumer protection will be furthered by expanding the statutory language as to what is to be included in the notice, and how it is to be delivered to consumers.” Specifically, MBC notes that BPC 138 does not necessarily provide consumers with sufficient information about what MBC does. MBC is concerned this this limited notice does not encourage consumers to access information from MBC or to contact MBC.

While the general provisions of BPC could be enhanced for improved notification to consumers by all DCA licensees, for purposes of MBC, it may be appropriate to include language in the Act to outline the notification MBC licensees should provide consumers.

Staff Recommendation: *The Committees may wish to amend the Act to specify additional information about MBC and how to access MBC services that should be provided to patients and the public. MBC should work with the Committees and stakeholders in order to determine the information consumers should receive and provide suggested statutory language to fulfill this important mission of arming the public with information about MBC.*

ISSUE #9: (PHYSICIAN HEALTH AND WELLNESS PROGRAM.) MBC is considering implementing a Physician Health and Wellness Program. MBC’s prior program faced significant shortfalls and raised concerns about patient protection. How will MBC ensure the program will successfully assist physicians while ensuring patients are not harmed?

Background: SB 1177 (Galgiani, Chapter 591, Statutes of 2016) authorizes MBC to establish a Physician and Surgeon Health and Wellness Program (PHWP) for the early identification and appropriate interventions to support a licensee in his or her rehabilitation from substance abuse and authorizes MBC to contract with an independent entity to administer the PHWP. The bill requires MBC, if it establishes a PHWP, to contract for administration with an independent administering entity selected by MBC through a request for proposals process. SB 1177 also establishes requirements for a PHWP and provides that MBC shall determine the appropriate fee that a participant shall pay to cover all costs for participating in the PHWP, including any costs to administer the PHWP.

Proponents of the bill were concerned that California physicians are the only licensed medical professionals without a wellness and treatment program aimed at providing support and rehabilitation for substance abuse, stress, and other health issues. The MBC previously administered a Physician Diversion Program (PDP), created in 1980 to rehabilitate doctors with mental illness and substance abuse problems without endangering public health and safety. Under this concept, physicians who abuse drugs and/or alcohol or who are mentally or physically ill may be “diverted” from the disciplinary track into a program that monitors their compliance with terms and conditions of a contract that is aimed at ensuring their recovery. The PDP monitored participants’ attendance at group meetings, facilitated random drug testing, and required reports from work-site monitors and treatment providers. Many of the physicians in the PDP retained full and unrestricted medical licenses during their participation and enjoyed complete confidentiality. In recognition that patient safety could not continue to be compromised, as numerous audits pointed out about the PDP, the MBC voted unanimously on July 26, 2007 to end the PDP. The PDP was allowed to sunset on June 30, 2008.

While MBC housed its diversion program, other boards outsource these functions. The DCA currently manages a master contract with MAXIMUS, Inc. (MAXIMUS), a publicly traded corporation for the healing arts boards that have a diversion program. Under this model, the individual boards oversee the programs, but services are provided by MAXIMUS. These diversion programs generally follow the same general principles of the MBC’s former PDP. Health practitioners with substance abuse issues may be referred in lieu of discipline or self-refer into the programs and receive help with rehabilitation. After an initial evaluation, individuals accept a participation agreement and are regularly monitored in various ways, including random drug testing, to ensure compliance.

SB 1441 (Ridley-Thomas, Chapter 548, Statutes of 2008) required the DCA to develop uniform and specific standards that shall be used by each healing arts board in dealing with substance-abusing licensees in 16 specified areas, including requirements and standards for: (1) clinical and diagnostic evaluation of the licensee; (2) temporary removal of the licensee from practice; (3) communication with licensee’s employer about licensee status and condition; (4) testing and frequency of testing while participating in a diversion program or while on probation; (5) group meeting attendance and qualifications for facilitators; (6) determining what type of treatment is necessary; (7) worksite monitoring; (8) procedures to be followed if a licensee tests positive for a banned substance; (9) procedures to be followed when a licensee is confirmed to have ingested a banned substance; (10) consequences for major violations and minor violations of the standards and requirements; (11) return to practice on a full-time basis; (12) reinstatement of a health practitioner’s license; (13) use and reliance on a private-sector vendor that provides diversion services; (14) the extent to which participation in a diversion program shall be kept confidential; (15) audits of a private-sector vendor’s performance and adherence to the uniform standards and requirements; and (16) measurable criteria and standards to determine how effective diversion programs are in protecting patients and in assisting licensees in recovering from substance abuse in the long term. The Uniform Substance Abuse

Standards (Uniform Standards) were finally adopted in early 2010, with the exception of the frequency of drug testing which was finalized in March 2011. The MBC formally implemented the Uniform Standards in July 2015.

Currently, impaired physicians with substance abuse issues must find their own treatment facility for assistance. MBC is not made aware that the physician received treatment unless a complaint is received, and the physician may present the treatment as evidence in a disciplinary proceeding only if he or she wishes. When MBC is made aware of substance abuse, licensees are placed on formal probation, with terms customized to fit the licensee's individual need. Typical terms include participation in support group meetings, random testing for drug and alcohol use, practice restrictions, and/or medical or psychiatric treatment, including psychotherapy. MBC still retains the power to currently order biological fluid testing as a condition of probation. If the physician tests positive, MBC issues a cease practice order, if allowed in the condition of probation, until MBC investigates and takes subsequent action. If the condition does not authorize a cease practice order, MBC investigates whether the physician is safe to practice medicine. If not, MBC staff will seek an ISO or ask the physician to agree not to practice via a stipulated agreement.

It appears that MBC is preparing to implement a PHWP. MBC held an interested parties meeting in January to discuss regulatory steps necessary for any program. The Governor's 2017/2018 budget includes a request for MBC to add one position to its staff dedicated to administration of a program (despite a program not being in place). It would be helpful for the Committees to understand what steps MBC is taking to implement a PHWP, how the PHWP will conform to the Uniform Standards, how MBC will assure robust accountability for and oversight of the PHWP and how MBC will ensure there are no conflicts of interest in the administration a PHWP should MBC implement a program.

Staff Recommendation: *MBC should update the Committees on the implementation of a PHWP, including the status of implementation and steps MBC plans to take to ensure the PHWP does not repeat the mistakes of the former PDP.*

ISSUE #10: (INPUT FROM INTERESTED PARTIES.) MBC invites stakeholders to participate in meetings and provides formal opportunities for representatives of various state agencies, organizations and professions to present to MBC. Should representatives for the Naturopathic Medicine Committee be allowed to provide information to MBC in a formal MBC meeting setting to better inform members and staff about the role of naturopathic physicians as licensees in California?

Background: According to the Naturopathic Medicine Committee (NMC), naturopathic medicine is a distinct and comprehensive system of primary health care that uses natural methods and substances to support and stimulate the body's self-healing process. Naturopathic medicine includes the combination of a variety of natural medicines and treatments. Naturopathic doctors (NDs) are clinically trained in both natural and conventional approaches to medicine and can prescribe all natural and synthetic hormones, epinephrine, and vitamins, minerals, and amino acids independent of physician supervision. California NDs complete 72 pharmacology course hours in school and are required to complete a minimum of 20 hours of pharmacotherapeutic training every two years as part of their 60 hour continuing education requirement. NDs attend four year, graduate-level, accredited naturopathic medical schools, are trained as primary care providers, and take a national, standardized licensing examination. NDs have limited opportunities to complete hospital residencies, but perform at least 1500 hours of clinical rotations at clinics and private doctors' offices during their education

program. California is one of 17 states that license NDs, and over 500 ND licenses have been issued to date.

Stemming from complaints received by MBC about NDs, NMC believes it could be helpful for MBC to receive a presentation about the legal abilities for NDs to practice in California. The NMC cites a 2010 case that MBC dedicated enforcement staff resources and eventually arrested a ND for practicing medicine without a license, however, charges were dropped when a better understanding of the Naturopathic Doctors Act was gained by both MBC investigators and OAG.

It would be helpful for MBC members and their staff to learn more about the legal practices NDs are authorized to perform in California.

Staff Recommendation: *MBC should have representatives of NMC attend an upcoming MBC meeting to better inform MBC staff and members about the profession.*

ISSUE #11: (BOARD CERTIFICATION.) BPC Section 651 requires MBC to review and approve specialty boards who are not approved by the American Board of Medical Specialties (ABMS) but believe they have equivalent requirements. The law also prohibits a physician from advertising that he or she is “board certified” unless the individual holds a certification from a specialty board approved by the ABMS, a specialty board with an Accreditation Council for Graduate Medical Education (ACGME) accredited post graduate training program, or a specialty board with equivalent requirements approved by MBC. MBC is required, then, to approve or disapprove these specialty boards based upon their equivalency. The discussion of MBC’s continued role in approving specialty boards has been raised in previous reviews of MBC and remains an issue. Is MBC really the most appropriate entity to determine board certification equivalency? What is the impact to California patients if MBC no longer performs these reviews?

Background: The role of MBC in evaluating specialty boards not affiliated with or certified by ABMS has been a source of discussion, legislation and contention for many years. In 1990, SB 2036 (McCorquodale, Chapter 1660, Statutes of 1990), sponsored by the California Society of Plastic Surgeons, among others, sought to prohibit physicians from advertising board certification by boards that were not member boards of the American Board of Medical Specialties (ABMS). It added BPC Section 651(h) to prohibit physicians from advertising they are “board certified” or “board eligible” unless they are certified by any of the following:

- An ABMS approved specialty board;
- A board that has specialty training that is approved by the Accreditation Council for Graduate Medical Education (ACGME); or
- A board that has met requirements equivalent to ABMS and has been approved by the MBC.

The ultimate effect is to provide that unless physicians are certified by a board, as defined by law, physicians are prohibited from using the term “board certified” or “board eligible” in their advertisements. The law does not, however, prohibit the advertising of specialization, regardless of board certification status.

To implement the law, MBC adopted regulations which are substantially based on the requirements of ABMS, including number of diplomates certified, testing, specialty and subspecialty definitions, bylaws, governing and review bodies, etc. The most notable requirement relates to the training provided to those certified by the specialty boards. In MBC's regulations, training must be equivalent to an ACGME postgraduate specialty training program in "scope, content, and duration".

Since the regulations were adopted, MBC has reviewed a number of specialty board applications, and has approved the following four boards:

- American Board of Facial Plastic & Reconstructive Surgery
- American Board of Pain Medicine
- American Board of Sleep Medicine
- American Board of Spine Surgery

MBC has denied approval to the American Academy of Pain Management and American Board of Cosmetic Surgery.

The purpose of the law and regulation is to provide protection to consumers from misleading advertising. Board certification is a major accomplishment for physicians, and while board certification does not ensure exemplary medical care, it does guarantee that physicians were formally trained and tested in a specialty, and, with the ABMS' Maintenance of Certification (MOC) requirements to remain board-certified, offers assurances that ongoing training, quality improvement, and assessment are occurring.

At the time the legislation was promoted, a number of television news programs covered stories from severely injured patients that were victims of malpractice from physicians who advertised they were board certified, when, in fact, they had no formal training in the specialty advertised. The law put an end to physicians' ability to legally advertise board certification if the certifying agency was not a member board of ABMS.

The law addresses advertising and does not in any way require physicians to be board certified or formally trained to practice in a specialty or in the specialty of which they practice. Physicians only need to possess a valid physician's license to practice in any specialty. Health insurance companies typically only choose board-certified physicians for their panels or those physicians whose credentials they have vetted. Hospitals grant privileges to physicians after conducting a review of qualifications through a process called "credentialing" which includes determining a physician's accredited training and board certification. Thus, most physicians granted hospital privileges are board-certified in the specialty for which they are granted privileges, or similarly highly, formally trained.

The "board certification" advertising prohibition is primarily meaningful for elective procedures – those procedures that are not reimbursed by insurance or those performed outside of hospitals or hospital clinic settings.

MBC does not appear to face significant cost pressure for its actual review of these boards, as there have been few applications in recent years. Non-ABMS certifying boards may be deterred from filing

applications due to the law, the strict regulations, the demanding review process and MBC's \$4030 application fee. While processing an application to determine if the minimum information has been provided can be completed by an MBC analyst, the actual evaluation of the medical training must be performed by an expert physician consultant with academic experience. Generally the consultant used is an emeritus professor of medicine and former training program director who has served on residency review committees. (Residency review committees are part of the ACGME/ABMS review process.) MBC then must pay for the services of a medical education expert to perform a review of the specialty board's formal training program, cost for which varies but runs in the general range of \$5,000 to \$11,000. MBC has statutory authority to increase the application fee as necessary to cover its review costs.

However, MBC has incurred significant costs related to litigation over MBC board denials. The American Academy of Pain Management was denied and filed four suits against the MBC, including one in Federal Court. The American Board of Cosmetic Surgery applied for approval twice, was denied both times, and filed suit on the second denial. To date, MBC has prevailed in these cases but at considerable costs, conservatively estimated in excess of \$200,000 due in large part to the very high charges for OAG attorneys to represent MBC in these matters.

The ABMS is a well-established, large organization with tremendous resources, both in revenue, infrastructure, and expertise, far beyond those of MBC. The Act basically tasks MBC with performing the same duties, with regards to the work MBC undertakes to approve non-ABMS boards, as the tasks of ABMS, the ACGME and the specialty boards and their residency review committees, yet MBC has only a fraction of their resources. Unlike the ABMS process, the MBC is not a part of developing curriculum or training programs, but is being required to consider whether or not the criteria for certification and the training provided is "equivalent" as defined by the MBC regulation.

MBC has maintained through prior review and again this year that three entities have the expertise to review and evaluate the quality of medical specialty boards' training and certification criteria: (1) ABMS, (2) ACGME, and to a lesser degree (3) medical schools that provide ABMS designed and ACGME accredited residency training programs. MBC acknowledges, though, that it would be inappropriate for any of these entities to judge a competing specialty board training program. MBC has advised the Legislature that provisions in the BPC related to MBC approval of non-ABMS specialty board should be deleted and instead, physicians should only be allowed to advertise as board certified if they have been certified by ABMS boards and the four additional boards currently approved by the MBC.

The California Society of Plastic Surgeons (CSPS) agrees with this request by MBC, noting that MBC does not have the resources or expertise to determine equivalency, that this role should be eliminated but also agrees that boards that have already been approved by MBC should be grandfathered into law as recognized. CSPS notes that the law does not restrict the ability for a physician to state they have a specialty in a certain area of their practice but rather is specific to advertisements using the term "board certified".

According to the American Society of Plastic Surgeons (ASPS), MBC's objectives of reducing its legal exposure and protecting patients by prohibiting diplomats of substandard board from advertising their certification to consumers can be continued through changes to BPC 651 proposed by ASPS.

The American Board of Pain Medicine (ABPM), one of the current MBC approved non-ABMS entities states that "the existing MBC process has served as an important tool for the state in weeding

out less rigorous certification entities.” ABPM would like to ensure that non-ABMS boards approved by MBC remain approved by being grandfathered and states concerns that the elimination of MBC’s role, “without an appropriate process to vet alternate boards may lower the bar for use of the term ‘board certified’ which will ultimately put patients at risk for negative health outcomes.”

It would be helpful for the Committees to better understand ramifications for patients as well as the potential impact to licensed California physicians in terms of their ability to safely and effectively treat patients if BPC 651 is amended to remove MBC from the review of non-ABMS specialty boards.

Staff Recommendation: *The Committees may wish to amend the Act, as proposed through legislation in 2013, to deal with this issue. MBC should advise the Committees on the impact to patients if MBC no longer approves non-ABMS specialty boards for equivalencies and what it means for patients if they no longer see advertisements for services from a physician who is board certified by a non-ABMS board that MBC has not already approved.*

ISSUE #12: (ACCESS TO CARE.) California law prohibits physicians from being directly employed by corporations as a means of ensuring that corporations are not practicing medicine, and in order to preserve the independence of physician judgment while preventing an employer’s interests from interfering with physician decisions or the physician-patient relationship. Healthcare has evolved significantly since the inception of this ban and it is unclear whether these legal prohibitions are still achieving the original purpose. Is the ban on the corporate practice of medicine still appropriate for healthcare today?

Background: The ban on the corporate practice of medicine, or CPM doctrine, is usually referred to in the context of a prohibition, banning hospitals from employing physicians. The ban on CPM evolved in the early 20th century when mining companies had to hire physicians directly to provide care for their employees in remote areas. However, problems arose when physicians’ loyalty to the mining companies conflicted with patients’ needs. Eventually, physicians, courts and legislatures prohibited CPM in an effort to preserve physicians’ autonomy and improve patient care.

Over the years, various state and federal statutes have weakened the CPM prohibition. According to a 2007 report prepared by the California Research Bureau (CRB), “California’s CPM doctrine has been defined largely through lawsuits and Attorney General opinions over decades, and then riddled by HMO and other legislation; its power and meaning are now inconsistent.... Although some non-profit clinics may employ physicians, California applies the CPM doctrine to most other entities.... Teaching hospitals may employ physicians, but other hospitals, including most public and non-profit hospitals, may not employ physicians. Professional medical corporations are expressly permitted to engage in the practice of medicine, and may employ physicians. [However, t]hese medical corporations may operate on a for-profit basis, although the profit motive was one of the original rationales of the CPM prohibition.”

A 2016 CRB report notes that “since 2007, the provision of healthcare has undergone changes in California. The Affordable Care Act is responsible for an increase in insured patients across the state. In 2016-2017, 13.5 million Californians are expected to have enrolled in Medi-Cal, up from 7.9 million in 2012-2013, and 1.5 million people will be enrolled in Covered California at the end of 2015-2016. As a result, more insured patients than ever are accessing healthcare services without a commensurate increase in healthcare practitioners.” The report suggested assessing changing financial incentives; considering whether other methods of protecting physician autonomy are sufficient; increasing patient access to data about physician-hospital relationships and hospital metrics;

determining whether the current alignment strategies used by physicians and hospitals are more costly than direct employment models; and collecting additional data to better understand the impact of CPM.

Throughout the years, a number of exceptions to the CPM ban have been established statutorily, thereby allowing certain types of facilities to employ physicians, including:

- Clinics operated primarily for the purpose of medical education by a public or private nonprofit university medical school, to charge for professional services rendered to teaching patients by licensed physicians who hold academic appointments on the faculty of the university, if the charges are approved by the physician in whose name the charges are made;
- Certain nonprofit clinics organized and operated exclusively for scientific and charitable purposes, that have been conducting research since before 1982, and that meet other specified requirements, to employ physicians and charge for professional services. Prohibits, however, these clinics from interfering with, controlling, or otherwise directing a physician's professional judgment in a manner prohibited by the CPM prohibition or any other provision of law;
- A narcotic treatment program regulated by the Department of Alcohol and Drug Programs to employ physicians and charge for professional services rendered by those physicians. Prohibits, however, the narcotic clinic from interfering with, controlling, or otherwise directing a physician's professional judgment in a manner that is prohibited by the CPM prohibition or any other provision of law; and,
- A hospital that is owned and operated by a licensed charitable organization that offers only pediatric subspecialty care, as specified.
- Until 2024, a federally certified critical access hospital which is a small (25 or less beds) hospital located in a remote, rural area.

California currently has a physician shortage. As the 2016 CRB report notes, "AMA figures show that, on average, California has 80 primary care physicians and 138 specialty physicians per 100,000 residents. This is in the upper range for primary care physicians (60-80) and above the range for specialty care physicians (85-105) recommended by the Department of Health and Human Services. However, when disaggregated by region, there is a coverage disparity. California's rural regions have lower numbers of physicians than its urban areas. For instance, the San Joaquin Valley has only 45 primary care physicians and 74 specialty physicians per 100,000 residents, compared with the Bay Area's 78 primary care physicians and 155 specialists per 100,000 residents. The number of healthcare providers, including primary care physicians, in California is not anticipated to dramatically increase soon."

The nationwide trend in healthcare is toward direct employment. According to a 2011 survey from the consulting firm Accenture:

"U.S. physicians continue to sell their private practices and seek employment with healthcare systems, according to a new survey from Accenture. As physicians migrate from private practice to larger health systems, the new landscape will require healthcare information technology (IT), medical device manufacturers, pharmaceutical companies and payers to revise their business models and offerings. At the same time, hospitals will need to determine how to

retain and recruit the correct mix of physicians, especially in high-growth service lines, including cardiovascular care, orthopedics, cancer care and radiology. Patients will increasingly move to large health systems, as opposed to the current trend of visiting doctors in private, small practice settings.

“‘Health reform is challenging the entire system to deliver improved care through insight driven health,’ said Kristin Ficery, senior executive, Accenture Health. ‘We see an increasing number of physicians leaving private practice to join hospital systems, which will force all stakeholders to revise and refine their business models, product offerings and service strategies.’”

Benefits to direct employment include:

- Relief from administrative responsibilities, especially those relating to insurance billing.
- Malpractice insurance.
- Greater access and support for healthcare IT tools, facilities, and medical equipment.
- A predictable work week.
- Economic stability.

The law provides for protections against retaliation for health care practitioners who advocate for appropriate health care for their patients, pursuant to *Wickline v. State of California* (192 Cal. App. 3d 1630): (BPC Section 510) by stating:

- a) It is the public policy of the State of California that a health care practitioner be encouraged to advocate for appropriate health care for his or her patients. For purposes of this section, “to advocate for appropriate health care” means to appeal a payer’s decision to deny payment for a service pursuant to the reasonable grievance or appeal procedure established by a medical group, independent practice association, preferred provider organization, foundation, hospital medical staff and governing body, or payer, or to protest a decision, policy, or practice that the health care practitioner, consistent with that degree of learning and skill ordinarily possessed by reputable health care practitioners with the same license or certification and practicing according to the applicable legal standard of care, reasonably believes impairs the health care practitioner’s ability to provide appropriate health care to his or her patients.
- b) The application and rendering by any individual, partnership, corporation, or other organization of a decision to terminate an employment or other contractual relationship with or otherwise penalize a health care practitioner principally for advocating for appropriate health care consistent with that degree of learning and skill ordinarily possessed by reputable health care practitioners with the same license or certification and practicing according to the applicable legal standard of care violates the public policy of this state.
- c) This law shall not be construed to prohibit a payer from making a determination not to pay for a particular medical treatment or service, or the services of a type of health care practitioner, or to prohibit a medical group, independent practice association, preferred provider organization, foundation, hospital medical staff, hospital governing body, or payer from enforcing reasonable

peer review or utilization review protocols or determining whether a health care practitioner has complied with those protocols.

As noted in the 2016 CRB report and reflected in broad legislative discussion on the topic, stakeholder groups have weighed in on CPM. The report cites a 2007 document from the California Medical Association (CMA) which notes that the CMA considers the CPM doctrine “a fundamental protection against the potential that the provision of medical care and treatment will be subject to commercial exploitation.” The report noted that in this document, CMA’s Legal Counsel defines the CPM bar broadly, as a prohibition on lay entities hiring or employing physicians or other health care practitioners, or interfering with physicians or other health care practitioners’ practice of medicine. Lay entities are also prohibited from contracting with health care professionals to render services. The CMA further notes that the CPM Bar “...is designed to protect the public from possible abuses stemming from the commercial exploitation of the practice of medicine,” and that California’s courts and legislature have upheld the CPM Bar to protect physicians from the “pressures of the commercial marketplace”.

Staff Recommendation: *The Committees may wish to discuss changes for greater patient access to care. The Committees may wish to consider the pros and cons for patients if physicians were permitted to be employed by corporations.*

ISSUE #13: (PRESCRIBER GUIDELINES). Current, appropriate guidelines outlining safe prescribing practices for certain types of medication, or medication prescribed to certain patient populations, are an important tool for physicians and MBC alike. While MBC recently updated its guidelines for prescribing pain medication, it is unclear what MBC does to ensure physicians read and use these guidelines. Guidance to physicians about prescribing psychotropic medication to foster youth and recommending medical cannabis could also be beneficial. How has MBC promoted its guidelines for prescribing controlled substances? Is MBC issuing guidelines related to the appropriate prescribing of psychotropic medication to foster youth or medical cannabis?

Background: MBC licensees issue prescriptions to patients for medication through the course of care, according to professional judgment and within the appropriate standard of care. For certain types of medication, and certain types of medication prescribed to certain types of patients, guidelines on appropriate and safe prescribing practices can serve as a helpful tools for the providers, patients and MBC alike.

Prescription medicine used to treat pain has been the focus of ongoing discussions in the Legislature, particularly in the years since MBC’s last review as California and the nation face an epidemic of prescription drug abuse and related overdose deaths. In 1994, MBC unanimously adopted a policy statement entitled “Prescribing Controlled Substances for Pain.” Stemming from studies and discussions about controlled substances, this policy statement was designed to provide guidance to improve prescriber standards for pain management, while simultaneously undermining opportunities for drug diversion and abuse. The guidelines outlined appropriate steps related to a patient’s examination, treatment plan, informed consent, periodic review, consultation, records, and compliance with controlled substances laws. Subsequent to MBC’s 1994 action, legislation that took effect in 2002 (AB 487, Aroner, Chapter 518, Statutes of 2001) created a task force to revisit the 1994 guidelines to develop standards assuring competent review in cases concerning the under-treatment and under-medication of a patient's pain and also required continuing education courses for physicians in the subjects of pain management and the treatment of terminally ill and dying patients. The intent of

the bill was to broaden and update the knowledge base of all physicians related to the appropriate care and treatment of patients suffering from pain, and terminally ill and dying patients. The passage of AB 2198 in 2006 (Houston, Chapter 350, Statutes of 2006) updated California law governing the use of drugs to treat pain by clarifying that health care professionals with a medical basis, including the treatment of pain, for prescribing, furnishing, dispensing, or administering dangerous drugs or prescription controlled substances, may do so without being subject to disciplinary action or prosecution.

MBC currently encourages all licensees to consult the policy statement and Guidelines for Prescribing Controlled Substances for Pain which were updated in 2014 based on input from a MBC Prescribing Task Force that held multiple meetings to identify best practices. According to the MBC website, “The board strongly urges physicians and surgeons to view effective pain management as a high priority in all patients, including children, the elderly, and patients who are terminally ill. Pain should be assessed and treated promptly, effectively and for as long as pain persists. The medical management of pain should be based on up-to-date knowledge about pain, pain assessment and pain treatment. Pain treatment may involve the use of several medications and non-pharmacological treatment modalities, often in combination. For some types of pain, the use of medications is emphasized and should be pursued vigorously; for other types, the use of medications is better de-emphasized in favor of other therapeutic modalities. Physicians and surgeons should have sufficient knowledge or utilize consultations to make such judgments for their patients. Medications, in particular opioid analgesics, are considered the cornerstone of treatment for pain associated with trauma, surgery, medical procedures, or cancer.” MBC intends for the guidelines to educate physicians on effective pain management in California by avoiding under treatment, overtreatment, or other inappropriate treatment of a patient’s pain. Reduction of prescription overdose deaths is also an objective of the updated guidelines. *It would be helpful for the Committees to understand what steps MBC takes to ensure licensees consult the updated guidelines.*

Concern over the use of psychotropic medications among children have also been the subject of recent Legislative consideration and discussion, and have been well-documented in research journals and the mainstream media for more than a decade. The category of psychotropic medication is fairly broad, intending to treat symptoms of conditions ranging from attention deficit hyperactivity disorder (ADHD) to childhood schizophrenia. Some of the drugs used to treat these conditions are U.S. Food and Drug Administration (FDA)-approved, however only about 31 percent of psychotropic medications have been approved by the FDA for use in children or adolescents. It is estimated that more than 75 percent of the prescriptions written for psychiatric illness in this population are “off label” in usage, meaning they have not been approved by the FDA for the prescribed use, though the practice is legal and common across all manner of pharmaceuticals. Studies have found that the off-label use of these anti-psychotics among children is high, particularly among foster children.

In 2012, the DHCS and DSS convened a statewide Quality Improvement Project (QIP) to design, pilot, and evaluate effective practices to improve psychotropic medication use among children and youth in foster care. The QIP’s Clinical Workgroup released a set of guidelines to assist prescribers and caregivers in maintaining compliance with State and county regulations and guidelines pertaining to Medi-Cal funded mental health services and psychotropic prescribing practices for foster homes, group homes, and residential treatment centers. In addition, the guidelines include prescriber and caregiver expectations regarding developing and monitoring treatment plans for behavioral health care, principles for informed consent to medications, and governing medication safety. These guidelines are designed as a statement of best practice for the treatment of children and youth in out-of-home care.

MBC reported during conversations about SB 1174 (McGuire, Chapter 840, Statutes of 2016) that it has made the QIP's Guidelines for the Use of Psychotropic Medication with Children and Youth in Foster Care available to all licensees on its website as well as through an email to its licensee listserv. MBC's responsibilities in overseeing their licensees' prescribing habits of psychotropic medications to foster youth were also a component of an audit conducted by the California State Auditor pertaining to the oversight and monitoring of children in foster care who have been prescribed psychotropic medications. The audit revealed that some foster children were prescribed psychotropic medications in amounts and dosages that exceeded state guidelines and counties did not follow up with prescribers to ensure the appropriateness of these prescriptions. The audit also found that many foster children did not receive follow-up visits or recommended psychosocial services in conjunction with their prescriptions for psychotropic medications. *It would be helpful for the Committees to understand what additional steps MBC takes to ensure licensees consult the QIP's guidelines.*

MBC licensees are also authorized to recommend the use of cannabis for medical purposes. Since the approval of the Compassionate Use Act (contained in Proposition 215) by voters in 1996, state law has allowed Californians access to marijuana for medical purposes, and prohibited punitive action against physicians for making medical marijuana recommendations. The CUA established the right of patients to obtain and use marijuana to treat specified illnesses and any other illness for which marijuana provides relief. Three laws enacted in 2015 (AB 243, Wood, Chapter 688 Statutes of 2015; AB 266, Bonta, Chapter 689, Statutes of 2015 and; SB 643, McGuire, Chapter 719, Statutes of 2015), known collectively as the Medical Cannabis Regulation and Safety Act (MCRSA), provide a statutory framework to regulate medical cannabis. Under MCRSA, MBC is required to consult with the California Marijuana Research Program, known as the Center for Medicinal Cannabis Research, in order to develop and adopt medical guidelines for the appropriate administration and use of medical marijuana. MBC has a page on its website titled *Marijuana for Medical Purposes* which MBC notes was adopted by the full MBC in 2004 and amended in October 2014. This information page refers to the former CUA in defining the role of physicians and surgeons related to medical marijuana, but does note that MBC "developed this statement since marijuana is an emerging treatment modality. The Medical Board wants to assure physicians who choose to recommend marijuana for medical purposes to their patients, as part of their regular practice of medicine, that they WILL NOT be subject to investigation or disciplinary action by the Medical Board if they arrive at the decision to make this recommendation in accordance with accepted standards of medical responsibility. The mere receipt of a complaint that the physician is recommending marijuana for medical purposes will not generate an investigation absent additional information indicating that the physician is not adhering to accepted medical standards." MBC clarifies that a physician's written recommendation to a patient will not trigger action by MBC and notes that a patient need not have failed on all standard medications in order for a physician to recommend or approve the use of marijuana for medical purposes. Rather than direct licensees and the public to MBC guidelines, it refers physicians to links for other organizations' websites. It appears that the FSMB developed model policy guidelines regarding the recommendation in patient care for state boards to utilize, but those are also not provided to California physicians. *While MBC reports that it has a Marijuana Task Force, it would be helpful for the Committees to understand the status of the Task Force's work, the status of MBC guidelines and MBC's plan for dissemination of guidelines when they are adopted.*

Staff Recommendation: *MBC should update the Committees on its efforts related to guidelines for prescriptions of controlled substances for pain, psychotropic medication to foster youth and medical cannabis.*

MBC BUDGET ISSUES

ISSUE #14: (COST RECOVERY.) MBC is statutorily prohibited from seeking reimbursement from physicians for costs related to disciplinary action. MBC is only prohibited from collecting reimbursement from physicians and has the ability to seek cost recovery for other allied health professionals it may take disciplinary action against. In general, DCA boards are authorized to collect payment from licensees for the high costs a board pays related to disciplinary action, as investigation and prosecution charges significantly impact fund conditions. Should MBC once again be authorized to seek cost recovery from physicians for disciplinary action?

Background: MBC has been prohibited from recovering costs for administrative prosecution of physicians since 2006 when SB 231 (Figueroa, Chapter 674, Statutes of 2005) went into effect. Specifically, BPC Section 125.3 (k) states that MBC “shall not request nor obtain from a licentiate, investigation and prosecution costs for a disciplinary proceeding against the licentiate. The board shall ensure that this subdivision is revenue neutral with regard to it and that any loss of revenue or increase in costs resulting from this subdivision is offset by an increase in the amount of the initial license fee and the biennial renewal fee, as provided in subdivision (e) of Section 2435.”

It would be helpful for the Committees to better understand the impact of this inability to recover costs on MBC’s fund. With OAG costs rising and charges higher for OAG efforts today than in 2005, it would be helpful for the Committees to determine whether MBC still has the ability to pay for, without the option of reimbursement, disciplinary action. It would be helpful for the Committees to see a breakdown of charges for an average case that results in disciplinary action. It would also be helpful for the Committees to learn whether the inability to recover costs drives MBC’s and OAG’s decision to settle certain cases that would otherwise continue to accrue costs.

Staff Recommendation: *MBC should advise the Committees on the impact its inability to seek reimbursement for costly disciplinary action has on MBC’s fund. MBC should provide a projected fund condition to reflect MBC’s fund if MBC were again authorized to seek cost recovery.*

MBC LICENSING ISSUES

ISSUE #15: (MEXICO PILOT PROGRAM.) Legislation passed in 2002, established a pilot program aimed at addressing primary care and dental practitioner shortages by authorizing MBC and the Dental Board of California to issue licenses for three years to physicians and dentists from Mexico who meet specified criteria. The program has not been implemented. What are the barriers to MBC implementing this program? What steps has MBC taken since 2003 to put the program in place?

Background: As noted in a Senate Business and Professions Committee analysis in 2002, The Licensed Physicians and Dentists Program established by AB 1045 (Firebaugh, Chapter 1157, Statutes of 2002) was designed to bring physicians and dentists from Mexico who have rural experience, speak the language, understand the culture and know how to apply this knowledge in serving the large Latino communities in rural areas who have limited or no access to primary health care services. Bill proponents were concerned about addressing primary care physician and dentist shortages while maintaining a high quality of care. The bill authorized up to 30 licensed physicians specializing in family practice, internal medicine, pediatrics and obstetrics and gynecology and up to 30 licensed

dentists from Mexico to practice medicine or dentistry in California for up to three years and required the individuals to meet certain requirements related to training and education. Program participants are required to undergo a six month orientation program approved by MBC addressing medical protocol, community clinic history and operations, medical administration, hospital operations and protocol, medical ethics, the California medical delivery system, health maintenance organizations and managed care practices and pharmacology differences.

AB 1045 tasked MBC with oversight review of both the implementation of the program and an evaluation of the program. MBC was supposed to consult with medical schools applying for funding to implement and evaluate this program, executive and medical directors of nonprofit community health centers wanting to employ program participants and hospital administrators who would have program participants practicing in their hospital. The bill specified that any funding necessary for the implementation of the program, including the evaluation and oversight functions, was to be secured from nonprofit philanthropic entities and stated that implementation of the program could not move forward unless appropriate funding was secured from nonprofit philanthropic entities. AB 1045 also required MBC to report to the Legislature every January during which the program is operational regarding the status of the program and the ability of the program to secure the funding necessary to carry out its required provisions.

At its October 2016 quarterly meeting, MBC's E.D. reported on discussions surrounding implementation of the pilot program. The E.D. outlined the program as defined in BPC Section 853 and informed MBC that there had been several discussions regarding the program for the past 13 years but that funding had remained a barrier to implementation. The E.D. noted that when funds became available, MBC staff would begin implementing the program.

Given access to care issues, particularly those related to residents of rural communities and stemming from language barriers, remain a concern these many years following passage of the bill, it would be helpful for the Committees to understand remaining barriers to program implementation. It would also be helpful for the Committees to understand where program funding will come from and whether statutory changes are necessary to allow MBC to receive funding to implement the program.

Staff Recommendation: *MBC should update the Committees on the status of The Licensed Physicians and Dentists Program, including remaining barriers to implementation and funding options. MBC should advise the Committees of statutory changes necessary to the Act in order for the program to be implemented, considering the significant passage of time since its statutory creation and potential implementation.*

ISSUE #16: (POSTGRADUATE TRAINING AND MBC APPROVAL OF INTERNATIONAL MEDICAL SCHOOLS.) The Act specifies requirements for postgraduate training that MBC physician applicants must undertake and outlines what graduates of international medical schools must do in terms of postgraduate training. MBC approves all schools applicants for licensure must attend, including medical schools located in other countries. Are there amendments to the Act to ensure proper clinical training? Should MBC be in the business of approving international medical schools?

Background: The Act treats graduates of international medical schools and those located in the U.S. differently in terms of the clinical training required for MBC licensure. Applicants for licensure who graduated from an LCME-approved domestic medical school (domestic includes the U.S. and Canada) are required to complete one year of either ACGME (U.S.) or Royal College of Physicians and

Surgeons of Canada (RCPSC) (Canada) accredited postgraduate training. Applicants for licensure who graduated from a MBC approved international medical school must complete two years of ACGME or RCPSC accredited postgraduate training. ACGME and RCPSC accredited schools must meet the same educational and experience requirements, all programs are accredited by the same entity, all programs undergo specified re-accreditation assessments, and all programs are judged by the same standards. According to MBC, graduates of domestic medical schools meet the minimum undergraduate clinical requirements (4 weeks psychiatry, 4 weeks family medicine, 8 weeks medicine, 6 weeks obstetrics and gynecology, 6 weeks pediatrics, 8 weeks surgery, plus another 4 weeks from one of the clinical core subjects, and 32 weeks of electives) by virtue of attending a LCME-approved medical school.

Graduates of international medical schools must meet the same undergraduate clinical requirements, however, due to the lack of any international accreditation organization like the LCME, and lack of an LCME-like organization in many countries, MBC has attempted to recognize postgraduate training of these applicants but many are still not eligible for licensure by MBC. MBC has proposed solving this problem by amending the Act to require all applicants, regardless of school of graduation, to satisfactorily complete a minimum of three years of ACGME/RCPSC postgraduate training prior to the issuance of a full unrestricted license to practice. MBC proposes issuing training permits and identifying the scopes of practice for each training year, in conjunction with the postgraduate training programs. Three years comes from the industry-recognized standard of three years of training required for board certification by ABMS boards in specialties family medicine, internal medicine, pediatrics and others. According to MBC, this equitable evaluation process ensures the programs set the same criteria, requirements and standards and ensures that all participants in these programs meet the same criteria, requirements, and standards. MBC believes this approach will result in a more effective assessment of an applicant's eligibility for licensure than where he or she attended medical school and completed undergraduate clinical rotations. According to MBC, this new process will ensure physicians satisfactorily completing three years of ACGME or RCPSC postgraduate training, in any specialty, have developed and demonstrated competency in the same skill sets of patient care in a monitored and structured setting.

The Act currently requires MBC to approve all medical schools it accepts graduate applicants for licensure from. MBC approves medical schools in the U.S. and Canada that are accredited by the LCME. For schools not located in the U.S., MBC recognizes schools with historic approval from the World Health Organization and schools MBC itself approves, as there is no foreign equivalent to LCME.

In 2003, MBC adopted regulations establishing a standard review process and minimum standards for international medical schools whose graduates wish to apply for licensure in California. Medical schools located in another country are divided into two categories: schools that are owned and operated by the government of the country in which the school is domiciled whose primary purpose is to educate citizens to practice medicine in that country (also known as "(a)(1) schools") and schools with a primary purpose of educating non-citizens to practice medicine in other countries ("(a)(2) schools"). MBC's evaluation and assessment process for all international schools includes many steps, various protocols and copious amounts of staff time. "(a)(1)" schools are not required to undergo the same in-depth individual review of "(a)(2)" schools, as MBC has determined that free-standing for profit medical schools are less likely to satisfy MBC's minimal quality standards. MBC states that it relies on the expertise of individuals experienced in medical academies to determine whether or not "(a)(2)" schools are sufficient to meet quality requirements. Many "(a)(2)" schools are required to undergo a MBC staff site visit which allows MBC to verify information a school submits to MBC in its initial

application and self-assessment report. According to MBC, the process can take as little as 30 days or as long as three or more years, depending on factors like when documentation is received, when staff is approved to travel out of the country for inspection and when a site visit report is completed.

MBC currently recognizes 1,882 international medical schools, some of which require a reassessment every seven years, modeled after LCME requirements for domestic schools. Yet MBC reports that it is not able to conduct these reviews due to a lack of staffing and the fact that only a very limited number of MBC staff have the experience to review international medical schools. According to MBC, it does not have sufficient resources with appropriate knowledge of how medical education is developed and delivered, nor sufficient numbers of highly-trained and educated medical consultants to properly and adequately conduct these assessments and render decisions. Given the historic challenges for MBC to conduct quality review of international medical schools and the high cost for this activity, MBC suggests in its 2016 Sunset Report that the Act should be amended to eliminate requirements for MBC recognition of international medical schools and that MBC should instead require individuals to have graduated from a medical school listed in the World Health Organization's directory as an approved school. MBC advises that this change will speed up the timeframe for applications from graduates of foreign schools to be processed. MBC asserts that this will also allow the staff dedicated to international school approval to work on assisting with the processing of postgraduate training authorization letters and issuing licenses.

Staff Recommendation: *The Committees should consider MBC's suggestion to eliminate requirements for approval of international medical schools by MBC. Given that other states rely on MBC approval of international medical schools in lieu of there being an international organization equivalent to LCME, MBC should advise the Committees of any potential impacts.*

ISSUE #17: (LICENSE CYCLES.) Concerns have been raised about the way that MBC determines when licenses expire. Does it make more sense for MBC to issue two-year term licenses rather than having licenses expire based on a physician's date of birth?

Background: The birth date renewal system is used by many DCA boards to establish licensure cycle. Licenses are issued for a period of time ranging between 12 and 24 months depending on the licensee's birth month. If, for example, a licensee has a February birth date and his or her license is issued in March 2014, the license will expire at midnight on February 29, 2016. If, however, a licensee has a March birthday and his or her license is issued in March 2014, the license will expire at midnight on March 31, 2015.

In these examples, the license in the first scenario will expire after nearly 2 years, but in the second scenario, the license will expire after 12 months and 5 days. Despite the varying expiration dates, both licensees would need to pay the same initial license fee. This system has been perceived as unfair to first-time licensees because all licenses pay the same fee, regardless of how long the license lasts.

MBC uses a physician's birth date to calculate license expiration dates. According to MBC, the purpose of the birth date renewal initially was to ensure that the MBC did not have to process a large number of applications or renewals during peak times. However, now that MBC conducts outreach to medical school graduates and potential applicants, licenses are issued throughout the year. MBC advises that it offers applicants the option of waiting until their birth month for their physician and surgeon license to be issued but some applicants cannot wait until their birth month, resulting in a license not being valid for a full two years and overpayment of licensure fees to MBC. MBC has requested that the Act be amended to clarify it can issue licenses on a two-year cycle.

Staff Recommendation: *The Act should be amended to reflect changes to the way MBC establishes license cycles.*

ISSUE #18: (RETURNING TO PRACTICE AFTER A LAPSE IN LICENSURE.) MBC continues to study the issue of whether allowing a physician to return to practice after a lapse in licensure or practice for more than 18 months without completing additional training provides adequate public protection. MBC held an interested parties meeting to discuss this issue and is continuing to explore, along with partners and stakeholders throughout the nation, whether statutory changes are necessary to require additional training past a certain timeframe of practice inactivity.

Background: During the prior review of MBC, the Committees believed there should be consistency in the amount of time a physician and surgeon should be allowed to remain out of practice without receiving additional clinical training before renewing their license and/or allowing them to continue practice.

For a physician who has let his or her license expire, BPC Section 2456.3 states, in part, “a license which has expired may be renewed at any time within 5 years after its expiration.” In order to renew the license, the physician must simply submit the renewal paperwork, CME verifications and pay the fees and penalties. This can result in a licensee returning to active status even if the physician has not practiced medicine for up to five or more years. For example, a physician who, during the last two renewal cycles, did not practice clinical medicine, and then allowed the license to lapse four years prior to renewing, could go back into some sort of clinical practice. That physician who has not practiced for eight years can just renew, pay fees, demonstrate that CME has been obtained and go back into practice. MBC is still looking into this issue of how long an individual should be eligible to remain out of practice before having to undergo training.

MBC states that it continues to receive applications for medical licensure from individuals who have not practiced clinical medicine for many years. In addition, BPC Section 2428 authorizes a previous California licensee to apply for issuance of the former license, provided all requirements and criteria set forth in the statute are met. MBC states that most applicants satisfy these requirements yet not all of these applicants have updated their clinical competency by practicing in a monitored or supervised clinical setting. While MBC requires individuals who have not practiced medicine for five or more years to undertake a recognized national assessment of their knowledge and clinical skills, California does not have a provision requiring clinical practice in a monitored and/or supervised setting.

MBC believes it could be helpful to issue a Limited Educational Permit for a certain time period to allow individuals to receive a limited license to practice while they continue to undergo important clinical work. During the time an individual holds this permit, patient encounters would need to be supervised, patient records would need to be audited and a formal assessment of clinical skills would need to be provided to MBC by a supervisor at the end of the time period of this permit, with a determination of whether the applicant is safe to practice medicine or if additional clinical training is needed. MBC believes that this will ensure it has oversight for these individuals and will also ensure that the applicant has met minimum requirements to safely and competently practice as an independent physician.

Staff Recommendation: *MBC should provide an update to the Committees on the length of time an individual should be eligible to remain out of practice without additional training. MBC should*

advise the Committees of stakeholder meetings it has held on the Limited Educational Permit proposal and advise the Committees whether this is a trend other states are following. Based on a review of proposed statutory language and additional information about the impact such a permit would have on physicians and the public, the Committees may wish to amend the Act to allow MBC to implement this option.

MBC ENFORCEMENT ISSUES

ISSUE #19: (UTILIZATION REVIEW.) In the workers' compensation system, an insurer or self-insured employer is entitled to retain a physician to conduct "utilization review" of treatment recommendations made by the injured worker's physician, which can determine what treatment the injured worker will receive. Concerns about standard of care by UR physicians have been raised over the years, complaints for which MBC should have jurisdiction and should take action when necessary. Is MBC properly investigating complaints it receives based on UR decisions?

Background: California's workers' compensation system requires employers to secure the payment of workers' compensation for injuries incurred by their employees. Employers are required to establish a medical treatment utilization review (UR) process, in compliance with specified requirements, either directly or through its workers' compensation insurer or an entity with which the employer or insurer contracts for these services. UR refers to reviewing whether recommended treatment by physicians, based on medical guidelines, should be approved, modified, delayed or denied. The law specifies that only a licensed physician who is competent to evaluate the specific clinical issues involved in medical treatment services (and where these services are within the scope of the physician's practice) requested by the physician may modify, delay or deny requests for authorization of medical treatment for reasons of medical necessity to cure and relieve.

The MBC has for many years publicly asserted that when a medical director of a health plan or a utilization review physician in the workers' compensation system uses medical judgment to delay, deny or modify treatment for an enrollee or injured worker, that act constitutes the practice of medicine. This position, expressly stated on the MBC's website, has been presumed to be a correct interpretation of the Medical Practice Act by Legislators, regulators, physicians, and others involved with the Board. If a decision is contrary to the standard of care, the MBC should have clear authority to investigate the matter to determine whether the physician has engaged in unprofessional conduct.

As such, MBC notes that a decision to delay, modify or deny a medical treatment constitutes the practice of medicine under MBC's jurisdiction. The issue of who then can legally perform UR has been raised, specifically whether, because the treatment at issue is to be provided (in most cases) to a California resident, only a California-licensed physician can do UR. Proponents of legislation on this topic argued that physicians conducting UR who are not licensed in California may be unfamiliar with the specifics of California workers' compensation law and/or the details of the requirements of UR and in turn could be more likely to not properly follow California workers' compensation law. Proponents argued that out-of-state utilization review physicians made inappropriate decisions and thus a physician conducting UR should be licensed in California so that in the event practice standards are violated, MBC could take action against the physician.

During the prior review of MBC, the Committees questioned whether MBC should investigate complaints related to UR decisions, noting that complaints alleging UR decisions made by California-

licensed physicians that violate the standard of care and cause significant harm had been rejected by MBC staff as being outside MBC's jurisdiction. In response, MBC placed this issue on the agenda for several MBC meetings and confirmed that UR is the practice of medicine. MBC asserts that it does not close UR-related complaints as non-jurisdictional and has worked to inform physicians and the public of this authority.

Staff Recommendation: *MBC should advise the Committees of remaining barriers to timely enforcement of UR cases related to the standard of care.*

ISSUE #20: (MANDATORY REPORTING TO MBC.) MBC receives reports related to physicians from a variety of sources. These reports are critical tools that ensure MBC maintains awareness about its licensees and provide important information about licensee activity that may warrant further MBC investigation. MBC may not be receiving reports as required and enhancements to the Business and Professions Code may be necessary to ensure MBC has the information it needs to effectively do its job.

Background: There are a significant number of reporting requirements outlined in BPC designed to inform MBC about possible matters for investigation. MBC includes information in its Newsletter regarding mandatory reporting, conducts presentations regarding requirements for reporting and posts information on its website regarding the submission of required reports. Mandatory reports to MBC include:

BPC 801.01 requires MBC to receive reports of settlements over \$30,000 or arbitration awards or civil judgments of any amount. The report must be filed within 30 days by either the insurer providing professional liability insurance to the licensee, the state or governmental agency that self-insures the licensee, the employer of the licensee if the award is against or paid for by the licensee or the licensee if not covered by professional liability insurance.

MBC reports that in general, these reports appear to be submitted to MBC within the 30 day timeframe. MBC states that it has reminded insurers of the reporting requirements and the importance of providing correct data. During the last four fiscal years the average settlement amount was \$478,112.

BPC 802.1 requires physicians to report indictments charging a felony and/or any convictions of any felony or misdemeanor, including a guilty verdict or plea of no contest.

MBC states that it appears to be receiving these incidents as required. MBC confirms that licensees are reporting these criminal charges through its receipt of arrest and conviction notifications that come to MBC from DOJ. MBC states that it also conducts Lexis/Nexis searches to identify any arrests reported in the media. Failure to report a criminal conviction to MBC results in a citation – MBC issued 36 citations in FY 2012/2013, 17 citations in FY 2013/2014, zero citations in FY 2014/2015 (due to the transfer of sworn investigators to HQIU and MBC's inability to issue citations until it promulgated regulations in 2015) and 4 citations in FY 2015/2016.

BPC Section 802.5 requires a coroner who receives information, based on findings reached by a pathologist that indicates that a death may be the result of a physician's gross negligence, to submit a report to MBC. The coroner must provide relevant information, including the name of the decedent and attending physician as well as the final report and autopsy.

As was the case during the prior review, MBC reports that it is not receiving these reports as required, citing the submission of only 11 total reports between FY 2013/2014 and 2015/2016. Gross negligence may be a hard cause of death for a coroner to determine, which may lead to the low number of reports MBC receives. However, increased reporting by coroners to MBC when cause of death may be related to a physician could enhance MBC's enforcement efforts. The issue of coroners' reports is particularly salient for deaths related to prescription drug overdose. In those instances where a coroner determines cause of death is drug toxicity, and where the coroner findings deal with a young person, who is not a cancer patient on hospice or someone in a health facility setting, who was found dead in possession of various opioid combinations, the prescribing doctor and his or her practices may need to be looked into. MBC should receive coroner's reports as required by law and may benefit from receiving coroners reports where cause of death is expanded, beyond just gross negligence.

BPC Sections 803, 803.5 and 803.6 require the clerk of a court that renders a judgment that a licensee has committed a crime, or is liable for any death or personal injury resulting in a judgment of any amount caused by the licensee's negligence, error or omission in practice, or his or her rendering of unauthorized professional services, to report that judgment to MBC within 10 days after the judgment is entered. In addition, the court clerk is responsible for reporting criminal convictions to MBC and transmitting any felony preliminary hearing transcripts concerning a licensee to MBC.

MBC does not believe that it is receiving reports from the court clerks as required by statute. The total number of reports filed pursuant to 803 and 803.6 between FY 2013/2014 and 2015/2016 is 31.

BPC Section 805 is one of the most important reporting requirements that allows MBC to learn key information about a physician or surgeon. Section 805 requires the chief of staff and chief executive officer, medical director, or administrator of a licensed health care facility to file a report when a physician's application for staff privileges or membership is denied, or the physician's staff privileges or employment is terminated or revoked for a medical disciplinary cause. The reporting entities are also required to file a report when restrictions are imposed or voluntarily accepted on the physician's staff privileges for a cumulative total of 30 days or more for any 12-month period. The report must be filed within 15 days after the effective date of the action taken by a health facility peer review body.

In FY 2015/2016, MBC received 127 reports. However, MBC compared the reports it received to information contained in the National Practitioners Databank and determined it is likely receiving reports when a facility believes a report should be issued. MBC has attempted to enhance knowledge of this requirement.

MBC notes that a number of explanations may account for the observed decline in 805 reporting, including: hospitals finding problems earlier and sending physicians to remedial training prior to an event occurring that would require an 805 report; with the implementation of electronic health records and the mining of medical record data by the health entities, early identification is a real possibility; the growing use of hospitalists providing care to hospitalized patients, concentrating the care in the hands of physicians who specialize in inpatient care and who are less prone to errors than physicians who provide the care on only an occasional basis; or health facilities may simply just not be reporting information.

However, because the MBC does not have jurisdiction over the hospitals, it has no way of knowing the exact reason it does not receive reports. As CDPH and other hospital accrediting agencies have the authority to review hospital records and conduct inspections of the hospitals, MBC could benefit from being provided reportable peer review incidents detected during an inspection by CDPH or a hospital accrediting agency.

BPC Section 805.01 is a similarly extremely important requirement. The law requires the chief of staff and chief executive officer, medical director, or administrator of a licensed health care facility to file a report within 15 days after the peer review body makes a final decision or recommendation to take disciplinary action which must be reported pursuant to section 805. This reporting requirement became effective January 2011 and is only required if the recommended action is taken for the following reasons:

- Incompetence, or gross or repeated deviation from the standard of care involving death or serious bodily injury to one or more patients in such a manner as to be dangerous or injurious to any person or the public.
- The use of, or prescribing for or administering to him/herself, any controlled substance; or the use of any dangerous drug, as defined in BPC Section 4022, or of alcoholic beverages, to the extent or in such a manner as to be dangerous or injurious to the licentiate, or any other persons, or the public, or to the extent that such use impairs the ability of the licentiate to practice safely.
- Repeated acts of clearly excessive prescribing, furnishing or administering of controlled substances or repeated acts of prescribing, dispensing, or furnishing of controlled substances without a good faith effort prior examination of the patient and medical reason therefor.
- Sexual misconduct with one or more patients during a course of treatment or an examination.

The purpose of 805.01 reports is to provide MBC with early information about these serious charges so that MBC may investigate and take appropriate action to further consumer protection at the earliest possible moment. Accordingly, for any allegations listed above, the Legislature determined that an 805.01 report must be filed once a formal investigation has been completed, and a final decision or recommendation regarding the disciplinary action to be taken against a physician has been determined by the peer review body, even when the physician has not yet been afforded a hearing to contest the findings.

The statistics below show the incredibly low number of 805.01 reports that have been filed per FY since the requirement came into place:

FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
16	9	2	4	5

MBC has attempted to enhance knowledge of this requirement but is not receiving reports as required. In FY 2015/2016, five reports were received pursuant to B&P 805.01, while in this same fiscal year, 127 B&P Code section 805 reports were received.

According to MBC, it writes an article every January in its Newsletter, “Mandatory Reporting Requirements for Physicians and Others,” that reminds entities they required to file 805.01 reports. MBC reports that it also wrote a separate article for the Fall 2015 Newsletter, “Patient Protection is Paramount: File Your 805.01 Reports,” in an effort to boost compliance with the requirement.

In addition to amending the law to require MBC to receive peer review reports, MBC believes that enhanced penalties for not providing 805.01 reports to MBC may yield additional compliance. MBC notes that if an entity fails to file an 805 report, they could receive a fine of up to \$50,000 per violation, or \$100,000 per violation if it is determined that the failure to file the 805 report was willful. In contrast, there is no penalty for an entity’s failure to file an 805.01 report, despite the serious nature of the charges involved. MBC recommends amending BPC Section 805.01 to allow MBC to fine an entity up to \$50,000 per violation for failing to submit an 805.01 report, or \$100,000 per violation if it is determined that the failure to report was willful.

BPC Section 2216.3 requires accredited outpatient surgery settings to report an adverse event to MBC no later than five days after the adverse event has been detected, or, if that event is an ongoing urgent or emergent threat to the welfare, health or safety of patients, personnel, or visitors, not later than 24 hours after the adverse event has been detected.

In FY 2014/2015 the Board received 104 adverse event reports. In FY 2015/2016 the Board received 111 adverse event reports. Adverse events appear to be reported as required, with the number of reports received by MBC increasing, as outpatient surgery settings became familiar with the law and gained an understanding of the types of events that should be reported. Enhancements to this requirement are discussed in Issue # ___ below.

BPC Section 2240(a) requires a physician and surgeon who performs a medical procedure outside of a general acute care hospital that results in the death of any patient on whom that medical treatment was performed by the physician and surgeon, or by a person acting under the physician and surgeon’s orders or supervision, to report, in writing, on a form prescribed by the MBC, that occurrence to MBC within 15 days after the occurrence.

In FY 2014/2015 the Board received nine patient death reports and in FY 2015/2016, ten reports were received. MBC has worked with the Legislature to ensure that deaths from all procedures, rather just scheduled procedures, are reported.

Staff Recommendation: *The Committees should amend the Act to enhance MBC’s ability to receive important reports that inform MBC about its licensees.*

ISSUE #21: (OUTPATIENT SETTINGS.) California law prohibits physicians from performing some outpatient procedures unless they are performed in an accredited, licensed or certified setting. MBC approves agencies that accredit outpatient settings. MBC is required to receive information about incidents in these settings. Should MBC be provided additional data and

should additional reporting be required to ensure MBC has the best information, provided in a timely manner, about incidents in these settings?

Background: Physicians are prohibited from performing some outpatient surgeries unless they are performed in an accredited, licensed, or certified setting. Specifically, the law specifies that no physician shall perform procedures in an outpatient setting using anesthesia, except local anesthesia or peripheral nerve blocks, or both, complying with the community standard of practice, in doses that, when administered, have the probability of placing a patient at risk for loss of the patient's life-preserving protective reflexes, unless the setting is specified in Health and Safety Code Section 1248.1. Outpatient settings where anxiolytics and analgesics are administered are excluded when administered, in compliance with the community standard of practice, in doses that do not have the probability of placing the patient at risk for loss of the patient's life-preserving protective reflexes. This exclusion includes certain outpatient surgery settings, such as ambulatory surgical centers certified to participate in the Medicare program under Title 18, health facilities licensed as general acute care hospitals, federally operated clinics, facilities on recognized tribal reservations, and facilities used by dentists or physicians in compliance with various sections of law in the Act and Dental Practice Act.

MBC is required to approve accreditation agencies that accredit outpatient settings. As such, MBC adopted standards for the approval of these accreditation agencies. MBC has approved five accreditation agencies, the American Association for Accreditation of Ambulatory Surgery Facilities Inc., the Accreditation Association for Ambulatory Health Care, the Joint Commission, the Institute for Medical Quality and the American Osteopathic Association/Healthcare Facilities Accreditation Program. An outpatient setting may apply to any one of the accreditation agencies for a certificate of accreditation. Accreditation shall be issued by the accreditation agency solely on the basis of compliance with its standards as approved by MBC.

MBC posts information regarding outpatient surgery settings on its website. The information on the website includes whether the outpatient setting is accredited or whether the setting's accreditation has been revoked, suspended, or placed on probation, or if the setting has received a reprimand by the accreditation agency. The website data also includes the name, address, medical license number and telephone number of any owners, the name and address of the facility, the name and telephone number of the accreditation agency and the effective and expiration dates of the accreditation.

Accrediting agencies approved by MBC are required to notify and update MBC on all outpatient settings that are accredited. If MBC receives a complaint regarding an accredited outpatient setting, the complaint is referred to the accrediting agency for inspection. Once the inspection report is received, MBC reviews the findings to determine if any deficiencies were identified in categories that relate to patient safety and if patient safety deficiencies are detected, the complaint may be referred for formal investigation.

Per existing law (Health and Safety Code Section 1216), clinics licensed by CDPH, including surgical clinics, are required to report aggregate data to the Office of Statewide Health Planning and Development (OSHPD). This data includes number of patients served and descriptive background, number of patient visits by type of service, patient charges, and any additional information required by CDPH and OSHPD. Both a June 2013 report by the California Health Care Foundation (“Ambulatory Surgery Centers: Big Business, Little Data”) and CHCF’s 2015 follow-up report, (“Outpatient Surgery Services in California: Oversight, Transparency and Quality”) noted that physician-owned outpatient settings, which fall under the jurisdiction of MBC, are not providing this important data as that required by CDPH and OSHPD.

MBC believes that it is important to require both accredited and licensed outpatient settings to report data to OSHPD, as this data will provide important information on procedures being done in ambulatory surgery centers and will allow MBC and other regulatory agencies to be aware of any issues or areas of concern. Language was contained in 2015 legislation (SB 396 (Hill, Chapter 287, Statutes of 2015) that would have required the same data reporting for accredited outpatient settings as what is required for surgical clinics. However, due to concerns raised by stakeholders that the proposed data requirement was too broad and would not provide the appropriate health outcome information, the language was removed. MBC believes this information is still necessary and important to be reported.

MBC also believes that enhancements are necessary to current mandatory reporting by accredited outpatient settings of adverse events, as outlined in BPC Section 2216.3 and discussed above. These adverse events required to be reported are the same adverse events that hospitals are required to report to CDPH. The issue is that while accredited outpatient settings have been reporting these adverse events to MBC, just pointing to the hospital adverse events reporting section as the law does has proven to be problematic. Some of the adverse events hospitals have to report do not necessarily apply to accredited outpatient settings. MBC also believes that there are adverse events that occur in accredited outpatient settings that do not apply to hospitals, but should be added to the adverse event reporting requirements for accredited outpatient settings.

MBC states that there is confusion for some outpatient settings in terms of what adverse events should then be reported to MBC, particularly when an adverse event doesn't really fit into a specific category outlined in HSC 1279.1. MBC believes clarifications may be necessary.

Staff Recommendation: *MBC should update the Committees on its efforts to engage stakeholders and interested parties about the information MBC needs to receive from and about outpatient settings. Consideration should be granted to ensuring MBC has the information it needs about outpatient settings in order to protect patients and that the law is clear on what adverse events need to be reported to MBC.*

ISSUE #22: (ENFORCEMENT ENHANCEMENTS.) Various enhancements to the Act may be necessary for MBC to ensure public protection from dangerous physicians.

Background: MBC may be assisted in its ability to take swift disciplinary action when necessary and warranted through amendments to the Act.

Challenges Revoking the License of Physician Required to Register as a Sex Offender. BPC Section 2232 requires the “prompt revocation” of a physician and surgeon’s license when a licensee has been required to register as a sex offender based on a conviction for certain sexual offenses. MBC notes in its 2016 report to the Legislature that allowing physicians who are sex offenders to continue to practice medicine is contrary to its public protection mandate.

Specifically, as BPC 2232 is currently written, obtaining a prompt revocation has proven to be difficult for MBC. Once MBC learns that a doctor has been convicted of a crime requiring that he or she register as a sex offender, the MBC requests OAG to file an accusation on its behalf. This accusation, along with several other documents, is served on the respondent physician, and he or she has 15 days to file a Notice of Defense (NOD). MBC and OAG are then required to wait to receive that NOD before requesting to set a hearing with the Office of Administrative Hearings (OAH). Once the

hearing is set, pursuant to the APA, OAH is then required to send the respondent physician a Notice of Hearing no less than 10 days prior to the date of the hearing. Therefore, over a month will have passed before a hearing can even be set from the time MBC is notified that a physician has registered as a sex offender. If OAH does not quickly set the hearing after a request has been filed, a prompt revocation can actually turn into a several-month delay. In the meantime, because there are no restrictions on the license, the offending doctor may practice medicine and the public is at risk for possible further harm, unless MBC has been able to successfully take other action like obtaining an Interim Suspension Order.

MBC notes that without a definition of “prompt” in the Act and without tools for “prompt revocation”, MBC is actually not able to take quick action. According to MBC, an automatic revocation of a license would make more sense for these situations. MBC notes that automatic revocations are not new to professional licensees and cites the example of teachers who have been convicted of certain sex offenses who are suspended by the Commission on Teacher Credentialing, without having a hearing beforehand. Once the conviction becomes final, the teacher’s license is revoked. Specifically, Education Code Section 44425(a) provides that when a holder of a teacher credential has been convicted of certain sex offenses as defined in Education Code section 44010, the Commission on Teacher Credentialing immediately shall suspend the credential. When the conviction becomes final or when imposition of sentence is suspended, the commission immediately shall revoke the credential. Subdivision (c) provides that the revocation shall be final without possibility of reinstatement of the credential if the conviction is for a felony sex offense as defined in section 44010.

MBC believes that when it receives notification that a physician has been ordered to register as a sex offender, rather than filing an accusation and going through the lengthy administrative process, MBC should instead be able to file a pleading that immediately revokes the physician’s license. The respondent would still be eligible for due process consideration and a hearing if they make a request in writing. MBC notes that physicians who are ordered to register as sex offenders have already had their due process rights satisfied at the criminal level. In addition, if the physician requests a hearing at OAH after the revocation, their due process rights will be satisfied at the administrative level by allowing review of MBC’s decision.

Challenges to Obtain Patient Records and Key Documents. BPC Section 2225 provides that “Notwithstanding Section 2263 and any other law making a communication between a physician and surgeon...and his or her patients a privileged communication, those provision shall not apply to investigations or proceedings conducted under this chapter.”

According to MBC, it relies on this section to obtain medical records either through patient authorization or via subpoena. Recently, MBC faced a challenge to its authority to obtain records from a physician who practiced psychiatry and was accused of inappropriately prescribing medications. The patient authorized MBC to obtain his medical records, but then rescinded the authorization and objected to MBC’s subpoena for his medical records out of fear that the physician would stop prescribing to him. The superior court ultimately granted MBC’s motion for subpoena enforcement. The appellate court, however, initially determined that BPC Section 2225 did not allow MBC to obtain psychotherapy records when the patient objected and invoked the psychotherapist-patient privilege provided by Evidence Code Section 1014.

MBC notes in its 2016 report to the Legislature that it is concerned that similar challenges will be made in the future, and if successful, MBC’s ability to investigate physicians who declare themselves to be psychiatrists will be significantly hampered, especially in the area of overprescribing controlled

substances where the patient may refuse to sign an authorization and object to a subpoena for records due to issues with addiction and/or financial gain (in cases of diversion of prescription medications).

MBC's ability to investigate and protect the public depends upon its ability to enforce investigational subpoenas with a proper showing of good cause, regardless of the physician's specialty. MBC believes that amendments to BPC 2225 should be made to make it clear that invocation of the psychotherapist-patient privilege is not a barrier to MBC obtaining psychotherapy records via a subpoena upon a showing of good cause.

ISO filing versus Petition to Revoke Probation. Provisions in the APA, specifically contained within Government Code Section 11529, provide that if MBC pursues and obtains an ISO, it has 30 days to file an accusation. However, in some instances MBC may not file an accusation, but instead file a petition to revoke probation. MBC is concerned that this section of law does not treat an order to revoke probation the same as an accusation, despite the fact that a petition to revoke probation is very similar to an accusation. A petition to revoke probation serves as the charging document identifying what a physician has done to violate the law when a physician is on probation. MBC would like to add petitions to revoke probation to this section of the APA for needed clarification.

Staff Recommendation: *Consideration should be given to amending the Act and APA to ensure MBC has the necessary authority to process enforcement actions.*

ISSUE #23: (EXPERT WITNESS REPORTS.) **MBC may be hindered by provisions in the Administrative Procedure Act related to discovery, specifically the ability of MBC to receive expert witness reports prepared for a respondent. Are amendments necessary to ensure MBC can respond in a timely fashion to information provided in expert witness reports?**

Background: As noted during the prior MBC review and raised in MBC's 2016 report to the Legislature, MBC is concerned that provisions outlined in the Administrative Procedure Act (APA) limit MBC's ability to access, through discovery, information provided by experts who are used by a licensee, or his or her attorney, who is the subject of disciplinary action. A key tool for accessing information used in civil action is to depose individuals, however, APA provisions (Government Code Section 11511) only authorize depositions in extreme circumstances, circumstances that typically do not apply to MBC cases. While it may not be appropriate to amend and expand general discovery provisions under the APA, as the APA applies to all administrative hearings and any amendments could impact disciplinary proceedings of other administrative agencies and perhaps add costs or delay proceedings, it may be appropriate to amend the Act to deal specifically with expert testimony for MBC cases.

BPC Section 2334 specifically relates to expert testimony for MBC disciplinary cases. According to MBC the provisions in this section are beneficial to DAGs prosecuting MBC cases for a number of reasons. Upon receipt of an expert witness disclosure, DAGs can assess the qualifications of the respondent's expert in relation to the expert MBC may be using. Further, DAGs are able to provide a respondent's expert's narrative for a case and opinions to the expert used by MBC to determine whether the expert's previously expressed opinions change. Information contained in the expert witness reports can also assist MBC in determining necessary next steps for a case or can assist MBC's own expert in their testimony before an ALJ. Since discovery is so limited in proceedings governed by the APA, this section of the BPC provides at least some information to MBC and DAGs that impact proceedings in these important quality-of-care cases.

According to MBC, in some instances, once MBC receives these reports, amendments to an initial accusation filed may be necessary, thus increasing the timeframe for disciplinary action to be taken and that consumer protection can be enhanced through changes to this section in the Act.

Staff Recommendation: *The Committees should consider amending the Act to ensure MBC has important information related to an enforcement case, according to a timeline that assists MBC in taking swift action.*

ISSUE #24: (CEASE PRACTICE ORDERS.) MBC has the authority to seek an Interim Suspension Order from an Administrative Law Judge when MBC believes the public may be at risk due to physical or mental impairment. Does the Act need to be amended to ensure MBC can take swift action when physicians delay or refuse to comply with orders to undergo a physical or mental examination?

Background: BPC Section 820 authorizes MBC to order a physician to undergo a physical or mental health examination when MBC determines, through the course of an investigation, that a licensee's ability to practice may be impaired by physical or mental illness. Failure to comply with an examination order constitutes grounds for suspension or revocation of the individual's certificate or license (pursuant to BPC Section 821). However, the process for suspension or revocation for refusal to submit to a duly-ordered examination can be lengthy, as demonstrated by a recent court case in which a Board of Registered Nursing licensee refused a psychiatric examination yet continued to practice for months thereafter (see *Lee v Board of Registered Nursing*, 209 Cal. App. 4th 793; 147 Cal. Rptr. 3d 269; Sept. 26, 2012).

As noted during the prior MBC review and raised in MBC's 2016 report to the Legislature, to refuse or delay compliance with an examination order poses risks for consumers because of the possibility that a mentally or physically ill practitioner could continue to see patients until the MBC completes suspension or revocation proceedings. Public protection would be better served if MBC is authorized to issue a cease practice order in cases where compliance with an examination order under BPC Section 820 is delayed beyond a reasonable amount of time (the exact timeframe that constitutes "reasonable" could be determined through stakeholder discussions with MBC, interested parties and the Committees).

Staff Recommendation: *The Act should be amended to provide MBC the authority to issue a cease practice order in cases where a licensee delays or all together does not comply with an order to undergo a physical or mental health examination.*

ISSUE #25: (DISPARITY IN ENFORCEMENT ACTIONS.) MBC commissioned a third-party study to identify whether disparity in its enforcement actions were present. What is the status of MBC's efforts in the wake of the study's release?

Background: In response to concerns raised by members of the African American physician community and a formal request from the Golden State Medical Association (GSMA), MBC contracted with CRB to conduct a study aimed at determining if disparity exists in MBC's enforcement efforts. Anthony Jackson, M.D., an anesthesiologist from Southern California and GSMA raised the issue to MBC over the course of a number of meetings that African-American physicians were targeted and received discipline from MBC in higher numbers than other comparable ethnic groups.

MBC is required to collect certain demographic information from licensees on a voluntary basis. According to MBC, about 70 percent of licensees voluntarily provide this information.

CRB's study was released in January. Using archival data provided by MBC of complaints, investigations and discipline that occurred from July 2003 through June 2013, CRB determined that there is a correlation between physician race and the pattern of complaints, investigations and discipline. Latino and black physicians were both more likely to receive complaints and more likely to see those complaints escalate to investigations. According to the study, Latino physicians were also more likely to see those investigations result in disciplinary outcomes. CRB noted that the findings "should be taken with the caveat that this is an observational study, and many variables affecting the perception of physician performance (for instance, "bedside manner") could not be taken into account." CRB further determined that while there is evidence of disparate outcomes, there is no evidence that any actor has specifically applied racial bias to achieve these outcomes.

MBC discussed the study at its January meeting and formed a Demographic Study Task Force to further explore this issue and provide additional direction to MBC. MBC also noted that it would promptly begin training for members and all staff to ensure equity in its work.

Staff Recommendation: *MBC should provide an update to the Committees on its efforts to ensure that bias and disparities do not exist in any of its programs. MBC should establish a formal policy against racial discrimination.*

ISSUE #26: (COMPLAINTS.) **Complaints are the heart of MBC's enforcement program. Successfully processing complaints can ensure that patients and the public are protected. Delays in complaint processing can have grave effects on patients and the public and compound MBC's efforts to protect consumers. In consumer satisfaction surveys, MBC consistently receives unfavorable feedback and response for its handling of complaints. What efforts is MBC taking to process complaints, particularly with a rise in the number of complaints received?**

Background: Accepting, processing and acting on complaints from patients, the public, MBC staff, other agencies and other sources is a primary mechanism by which MBC can ensure that licensees are in compliance with the Act and that patients have options for action in the event that their physician violates the law. The timely processing of complaints provides MBC with critical information about their licensees and assists in prioritizing workloads.

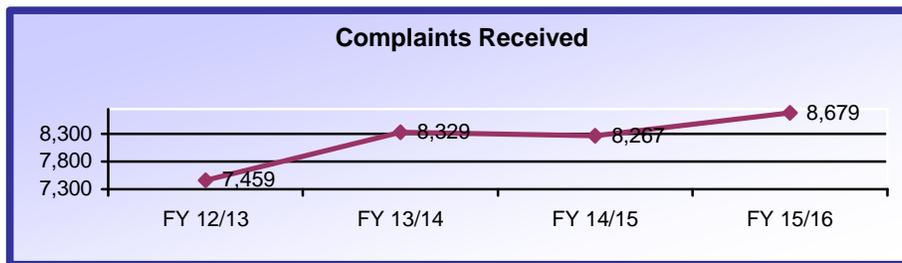
The law establishes MBC's prioritization for complaints and outlines the following as the highest priority for MBC:

- Complaints related to gross negligence, incompetence or repeated negligent acts that involve death or serious bodily injury to one or more patients, such that the physician and surgeon represents a danger to the public
- Drug or alcohol abuse by a physician and surgeon involving death or serious bodily injury to a patient
- Repeated acts of clearly excessive prescribing, furnishing, or administering of controlled substances or repeated acts of prescribing, dispensing, or furnishing of controlled substances without a good faith prior examination of the patient and medical reason therefor

- Repeated acts of clearly excessive recommending of cannabis to patients for medical purposes, or repeated acts of recommending cannabis to patients for medical purposes without a good faith prior examination of the patient and a medical reason for the recommendation
- Sexual misconduct with one or more patients during a course of treatment or an examination
- Practicing medicine while under the influence of drugs or alcohol
- Repeated acts of clearly excessive prescribing, furnishing, or administering psychotropic medications to a minor without a good faith examination of the patient and medical reason therefor.

Complaints are treated as confidential until such time as a complaint and investigation result in some type of formal, public action.

MBC reports there has been a continual increase in the number of complaints since the prior review. The average complaints received for the three fiscal years of the prior sunset report (FY 2009/2010 to FY 2011/2012) was 6,861 complaints received; whereas the average of the three fiscal years included in this report (FY 2013/2014 to FY 2015/2016) is 8,425, an increase of 1,564. Between FY 2014/2015 and FY 2015/2016 there was an increase of 412 complaints, which shows the numbers are continuing to increase.



It would be helpful for the Committees to better understand what MBC is doing to handle the influx of complaints. It would be helpful for the Committees to understand whether MBC treats complaints received by patients any differently than complaints generated by MBC staff in response to a report or news media article. It would be helpful for the Committees to better understand how MBC follows up on complaints, particularly how MBC contacts individuals who file complaints about their physicians to either gain additional information or to alert the individual of the status of a case.

Staff Recommendation: *MBC should update the Committees on its complaints process, giving particular attention to the work MBC does to ensure that patients have an opportunity to provide information that may be critical in determining what next steps to take and whether they are ever proactively informed when a complaint leads to formal disciplinary action.*

ISSUE #27: (VERTICAL ENFORCEMENT.) Originally implemented as a tool to bring about efficiencies in MBC enforcement efforts, VE does not appear to have reduced timeframes for disciplinary action and appears saddled with administrative challenges that significantly impact the ability for effective prosecution of administrative cases against physicians. Given that the initial intent and structure of the VE model does not appear to be functioning the way it was intended and given that timeframes for disciplinary action have actually increased, should VE be continued?

Background: Following the 2004 release of a statutorily mandated report by an independent monitor, MBC implemented VE, requiring DAGs to be involved in MBC's investigation activities as well as its prosecution activities. As initially drafted, SB 231 would have transferred MBC investigators to HQE to ensure seamless coordination, however, only the VE provisions became effective requiring the utilization of a VE model, with MBC investigators still housed at MBC and not transferred to OAG. At the time, MBC supported the transfer of investigators to the OAG's HQE.

Despite VE and other enhancements, MBC's enforcement activities were still called into question during the prior review of MBC by the Committees in 2013. MBC was seen as continuing to fail to aggressively investigate and pursue actions against dangerous physicians. In response, SB 304 of 2013 again proposed the transfer of MBC investigators to HQE but ultimately required MBC to transfer its investigators to DCA's DOI, establishing the framework for the current HQIU.

HQIU performs investigative services for the MBC, the Osteopathic Medical Board, the Board of Podiatric Medicine, the Board of Psychology, the Physician Assistant Board and all of the other allied health professions within MBC's jurisdiction. However, only MBC cases follow the VE model.

DOI and OAG worked to establish formal policies and procedures for VE following the transfer of investigators to DOI as of July 1, 2014. In July 2015, the VE Prosecution Protocol manual was finally formalized, providing guidelines for staff members conducting investigations and strategies to resolve disagreements between investigators and HQE DAGs. The manual also outlined cooperation and communication expectations between the two offices. The manual emphasized collaboration and conflict resolution between HQIU and HQE, stemming from strained personnel issues between the two offices. The manual sought to address disagreements by providing clarified definitions regarding the roles of each office and the expected amounts of direction and supervision HQE should provide HQIU.

Yet problems still persist and MBC enforcement timelines continue to grow.

The initial intent and structure of the VE model does not appear to be upheld, as cases are being conducted with the "handoff method". The entire purpose of the VE model was to eliminate this handoff method by aligning investigators and legal staff to handle cases together, instead of the traditional route of investigator gathering information and "handing" the case off to legal staff. With high levels of staff turnover in HQIU and shifting assignments in HQE, cases are not handled by the same investigator and same DAG from start to finish.

There are still significant working relationship challenges between HQIU and HQE, despite completion of the protocol manual. HQE DAGs may direct investigators to seek out certain information that could prove beneficial in an administrative licensure case but that impacts the independence trained peace officer investigators need in order to effectively investigate cases. Government Code provisions related to VE (GC 12529.6(b)) specifically use the word "direction," stating that an investigator shall, "under the direction but not the supervision of the deputy attorney

general,” be responsible for obtaining evidence in a matter. This no doubt impacts the team approach and may result in the expertise of both the investigator and DAG not being effectively utilized. Not every case should result solely in administrative action as initiated by a DAG, as investigations may bring criminal violations to light as well. HQIU faces an almost 40 percent vacancy in investigators, numbers that are not the same for other DOI investigators whose cases are not required to be coordinated with a DAG from the outset, and who may have independence in how they put their investigative skills to use.

A March 2016 MBC report on VE showed that MBC has spent \$18.6 million to implement the program and provided statistical data showing that the average investigation timeframe has increased. In FY 2014/2015 the timeframe was 382 days and during FY 2015/2016 the timeframe increased to 426 days. Data from the first half of FY 2016/2017 presented at a January MBC meeting indicate an average HQIU investigative case cycle time of 473 days.

Staff Recommendation: *Discretion is clearly needed in terms of determining when a case should be investigated under a VE model. In some instances, VE may not necessarily bring about enhanced action or results, yet all MBC cases must follow this process. Accessing and consulting DAGs may also prove to be beneficial for non-sworn MBC staff and HQIU investigators in other health board related cases may benefit from coordinating early on with a DAG. Strong consideration should be given to removing the requirement that all MBC cases follow a VE model or in the alternative eliminate the VE model entirely.*

ISSUE #28: (PUBLIC NOTIFICATION OF DISCIPLINARY ACTION.) Access to timely, accurate information about MBC licensees is a fundamental means by which patients and the public are informed about medical services provided to them. MBC posts information on its website and has improved these efforts yet significant gaps remain in the ability for patients to have full awareness of disciplinary action taken against their physician. For the small number of physicians ordered on probation by MBC, requiring that patients are proactively notified of their probationary status can serve as a useful tool in patients’ efforts to know their physician and know when their physician has violated the Act. What steps should be taken to ensure patients and the public are properly informed about MBC disciplinary action and about physician probationary status for the rare cases that result in MBC having to take such action to protect patients from harm?

Background: SB 231 referenced above in Issue #14 required the Little Hoover Commission to conduct a study and make recommendations on the role of public disclosure in the public protection mandate of the MBC. Those responsibilities were then transferred through SB 1438 (Figueroa, Chapter 223, Statutes of 2006) to the CRB of the California State Library. The study, *Physician Misconduct and Public Disclosure Practices at the Medical Board of California*, was completed in November 2008 and offered 11 policy options aimed at improving public disclosure access to information about physician misconduct, many of which were implemented by MBC and frame MBC’s current requirements and practices for public disclosure of disciplinary action. As a follow up to the study, MBC sponsored legislation in 2014 (AB1886, Eggman, Chapter 285, Statutes of 2014) to update the length of time information is made available to the public on the MBC’s website, allowing MBC to post the most serious disciplinary information on MBC’s website for as long as it remains public, rather than just 10 years.

MBC reports that it exceeds the DCA recommended minimum standards for public information and is consistent with the requirement that boards post accusations and disciplinary actions. MBC states that

in the event that the section of MBC's website which enables consumers to access information about a physician is not operational at any given time, MBC provides a phone number consumers can call to receive enforcement updates from MBC staff.

MBC's website provides the following information about physicians:

- Discipline taken by MBC (public reprimands and public letters of reprimand are only available for ten years on the website).
- Formal accusations by MBC of wrongdoing.
- Practice restrictions or practice suspensions pursuant to a court order.
- Discipline taken by a medical board of another state or federal government agency.
- Felony convictions MBC has reports of (for convictions after January 3, 1991).
- Misdemeanor convictions (for convictions after January 1, 2007) that resulted in a disciplinary action or an accusation being filed by MBC if the accusation is not subsequently withdrawn or dismissed.
- Citations received for a minor violation of the Act within the last three years (for citations that have not been withdrawn or dismissed).
- Public letter of reprimand issued at time of licensure within the last three years.
- Any hospital disciplinary actions that resulted in the termination or revocation of the physician's privileges to provide health care services at a healthcare facility for a medical disciplinary cause or reason reported to MBC after January 1, 1995.
- All malpractice judgments and arbitration awards reported to MBC after January 1, 1998 (between January 1, 1993 and January 1, 1998, only those malpractice judgments and arbitration awards more than \$30,000 were required to be reported to MBC).
- All malpractice settlements over \$30,000 reported to MBC after January 1, 2003 that meet certain criteria.

MBC also provides the following documents on its website for each licensee, as relevant, and unless specifically prohibited by law, allowing the public to see:

- The accusation or petition to revoke a license or amended accusation as filed by a DAG.
- The public letter of reprimand received by a licensee.
- The actual citation and fine received by a licensee.
- The suspension or restriction order issued by MBC.
- The administrative or disciplinary decision adopted by MBC.

While it is true that important information is available on MBC's website, a key issue for the Committees remains how easily available it is for California patients to access easily understandable information about physicians who have been the subject of disciplinary action, placed on probation and are practicing. When the MBC places physicians on probation, generally they continue to practice medicine and see patients under restricted conditions. Terms of probation may include certain practice limitations and requirements, but most commonly physicians on probation are not required to provide any information to their patients regarding discipline taken by MBC.

A determination of probation is a step in a lengthy disciplinary process, conducted in accordance with the Administrative Procedures Act, and offering due process for accused licensees. Once an individual is placed on probation, they have already had an accusation filed against them which is publicly available on MBC's website. The filing of an accusation alone requires significant justification that a

violation of the Act has occurred. In reviewing MBC data for current physicians on probation, proven violations that result in probation include gross negligence or incompetence, substance abuse, inappropriate prescribing, sexual misconduct or conviction of a felony. Probationary status is not secret. MBC only orders probation for a licensee once multiple steps in the life of a case have been taken. Probation is not loosely issued for suspicions or complaints or facts gained during an investigation that lead to the filing of an accusation for which clear and convincing evidence is present.

According to MBC data, there are currently 635 physicians on probation (this includes those issued a probationary license at application and those with an out of state address of record, for a total of 497 on probation with an address in California, 83 on probation with an address in another state, 38 with a probationary license with an address in California and 17 with a probationary license with an address in another state.) These individuals represent only a fraction of overall MBC licensees. (See Appendix in this report attached for a listing of those physicians and surgeons currently on probation.)

The MBC posts information regarding probation on its website and distributes the information to its email list, which includes media and interested persons who have signed up to receive it, relying on members of the public to take the steps to access important information. According to a recent Pew Research Center U.S. analysis, seniors, the most likely group to seek healthcare, are also the group most likely to say they never go online. About four-in-ten adults ages 65 and older (39 percent) do not use the internet, compared with only 3 percent of 18- to 29-year-olds. One-in-five African Americans, 18 percent of Hispanics and 5 percent of English-speaking Asian Americans do not use the internet, compared with 14 percent of whites.

Patients may be especially deserving of greater access to information about a physician on probation given the potential for future disciplinary action. The 2008 CRB study reported that physicians who have received serious sanctions in the past are far more likely to receive additional sanctions in the future. According to the CRB report, “These findings strongly imply that disciplinary histories provide patients with important information about the likely qualities of different physicians.” The CRB cited research that examined physician discipline data provided by FSMB. The researchers split their sample into two periods, Period A 1994 - 98 and Period B 1999 - 2002. They classified physicians by whether they had no sanctions in the period, or had been assessed with one or more mild, medium or severe sanctions. Severe sanctions encompassed disciplinary actions that resulted in the revocation, suspension, surrender, or mandatory retirement of a license or the loss of privileges afforded by that license. The medium sanctions included actions that resulted in probation, limitation, or conditions on the medical license or a restriction of license privileges. The study found that less than 1 percent of physicians who were unsanctioned during Period A were assessed a disciplinary action during Period B. However, physicians sanctioned during the earlier period were much more likely to be assessed additional sanctions in the second period; for example, 15.7% of those who received a medium sanction in Period A went on to receive either a medium or a severe sanction in Period B; physicians who received a medium sanction in Period A were 28 percent more likely to receive a severe sanction in Period B than someone who received no sanction in period A; and, physicians who received a medium sanction in Period A were 32 percent more likely to receive another medium sanction in Period B than someone who received no sanction in Period A.

In October, 2012 MBC staff made a proposal to the MBC to require physicians to inform their patients when the physician is on probation and required to have a monitor. In its recommendation staff said, “This would insure the public has the ability to make informed decisions regarding their healthcare provider.” MBC did not approve the staff proposal.

In 2015, a petition filed before the MBC by Consumers' Union Safe Patient Project called on MBC to amend its Manual of Model Disciplinary Orders and Disciplinary Guidelines by requiring physicians on probation to notify patients about their status as a probationer. Specifically, the petition asked MBC to require physicians who continue to see patients to inform their patients of their probationary status and take steps accordingly, including; (1) notifying patients of probationary status when the patient contacts a physician's office to make an appointment; (2) disclosing probationary status in writing; (3) having patients sign an acknowledgment that they received information from their physician about his or her probation; (4) posted a disclosure about probation in a physician's office in a place readily apparent to patients; (5) ensuring that disclosures include at least a one-paragraph description of the offenses that led the MBC to place the physician on probation as well any practice restrictions placed on the physician; (6) referring a patient to MBC's website to access the actual documents related to a physician's probation; and (7) maintaining a log of all patients who were provided notification.

MBC voted to deny the petition based on concerns about the impact this would have to the patient-physician relationship and concerns raised about the lack of exemptions of the requirement in certain settings like emergency rooms. Instead, MBC established a task force to explore a variety of suggestions for enhancing and improving the public's awareness of MBC's regulation of physicians. At the January 2016 MBC meeting, the task force discussed improving MBC's online license lookup function, modifying the consumer notice posted in physician waiting rooms, increasing public outreach regarding physicians on probation and revising MBC's Disciplinary Guidelines. MBC did not take action on the option for health care providers on probation to notify their patients. MBC held an interested parties meeting in January 2017 and sought stakeholder feedback on two possible amendments to the Manual of Model Disciplinary Orders and Disciplinary Guidelines, requiring notice of probationary status via a posted sign in a prominent place in a physician's office and requiring physician notification of probationary status to patients in writing. MBC did not take further action on these options.

Staff Recommendation: *The Act should be amended to ensure that patients receive timely notification of their physician's probationary status, that patients are easily able to obtain understandable information about violations leading to probation, and that MBC makes changes to the disciplinary enforcement information displayed on its website to allow for easier public access and understanding of actions MBC has taken.*

TECHNICAL CHANGES

ISSUE #29: (TECHNICAL CHANGES MAY IMPROVE EFFECTIVENESS OF THE MEDICAL PRACTICE ACT AND MBC OPERATIONS.) There are amendments to the Act that are technical in nature but may improve MBC operations and the enforcement of the Medical Practice Act.

Background: There are instances in the Medical Practice Act where technical clarifications may improve MBC operations and application of the statutes governing the MBC's work.

Staff Recommendation: *The Committees may wish to amend the Act to include technical clarifications.*

**CONTINUED REGULATION OF PHYSICIANS AND SURGEONS, LICENSED
MIDWIVES AND VARIOUS OTHER HEALTH PROFESSIONALS BY
THE MEDICAL BOARD OF CALIFORNIA**

ISSUE #30 (CONTINUED REGULATION BY MEDICAL BOARD OF CALIFORNIA.)

Should the licensing and regulation of physicians and surgeons, licensed midwives and other allied health professionals be continued and be regulated by the current MBC membership?

Background: Patients and the public are best protected by a strong regulatory board with oversight for physicians and surgeons and associated allied professions. MBC needs to take swift enforcement action and needs to improve timelines for case processing, particularly for complaints and cases with a high risk of patient and public harm. The MBC should be continued with a 4-year extension of its sunset date so that the Legislature may once again review whether the issues and recommendations in this Background Paper have been addressed.

Staff Recommendation: *The licensing and regulation of physicians and surgeons and allied health professions should continue to be regulated by the current board members of the Medical Board of California in order to protect the interests of the public. MBC should be reviewed again in four years.*

APPENDIX

Information contained in this Appendix can be found on the Medical Board of California website:

<http://www.mbc.ca.gov/>

Information in column one of the tables below includes a brief summary of the accusation document filed against the physician by the Medical Board of California and the Office of the Attorney General. Accusation information in column one reflects the most recent probation and may include accusation information from prior orders for probation.

The probation summary in column five and the probation date in column six of the tables below are from the most recent probation and in some cases may not reflect terms of probation from prior probations.

Acceptance of a settlement with the Medical Board of California is not an admission of guilt unless the licensee has expressly admitted guilt.

AGOLIA 1. Inappropriate prescribing, sex with patient, marijuana use	LINDSAY	113193	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION, USE OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	5/29/2015
CACIOPPO 1. Convicted of sexual misconduct with female patient	DINO	29198	ALAMEDA	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CACIOPPO SHALL HAVE A THIRD PARTY PRESENT WHILE TREATING OR EXAMINING FEMALE PATIENTS.	10/24/1997
FUJIMOTO 1. Allowed unlicensed permanent makeup person to use his medical license to obtain prescription medication in their unlicensed practice of medicine	ALLEN	7287	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/07/12 UNTIL 11/06/12. DURING PROBATION, DR. FUJIMOTO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/21/2012

<p>2. Inappropriate prescribing to a patient</p>					
<p>HEFFERNON</p> <ol style="list-style-type: none"> 1. Convicted of felonies in SF and San Mateo courts 2. Stole credit cards from coworkers 3. Stole from senior patient at convalescent center 4. Removed wedding and engagement rings off senior patient's finger 	<p>WANDA</p>	<p>81259</p>	<p>ALAMEDA</p>	<p>EFFECTIVE 06/14/01 LICENSE SURRENDERED; EFFECTIVE 10/31/2014 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>10/31/2014</p>
<p>HUANG</p> <ol style="list-style-type: none"> 1. DUI conviction 2. Convicted of possession of controlled substances without prescription 3. Adderall to stay awake during long ER shifts, takes valium daily even when working 4. Inappropriate prescribing 	<p>ALAN</p>	<p>111806</p>	<p>ALAMEDA</p>	<p>EFFECTIVE 06/05/15 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION HAS BEEN SERVED. RESTRICTIONS: SHALL NOT PRESCRIBE, AUTHORIZE, ORDER, DISPENSE, ADMINISTER, OR PROVIDE ANY DANGEROUS DRUGS OR CONTROLLED SUBSTANCES TO ANY MEMBER OF HIS FAMILY, DR. HUANG'S ABILITY TO PRESCRIBE, AUTHORIZE, ORDER, DISPENSE, ADMINISTER, OR PROVIDE ANY DANGEROUS DRUGS OR CONTROLLED SUBSTANCE IS LIMITED TO A HOSPITAL SETTING, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN</p>	<p>6/5/2015</p>

				ASSISTANTS.	
KERR 1. Sexual misconduct with female patient	DOUGLAS	69670	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/7/2015
LI 1. Negligent care of multiple patients 2. Several 805 reports from hospitals revoking her privileges because they were concerned for patient safety	EVELYN	48660	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/8/2011
RILEY 1. Found to have been taking patients drugs while on duty as an anesthesiologist – ketamine & sufentanyl	ANTHONY	62098	ALAMEDA	EFFECTIVE 07/03/01 SURRENDER OF LICENSE; EFFECTIVE 03/15/10 LICENSE REINSTATED; SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: DURING PROBATION, DR RILEY IS PROHIBITED FROM PRACTICING AS AN ANESTHESIOLOGIST, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	3/15/2010

ROWELL 1. Inappropriate and excessive prescribing of controlled substances to multiple patients	RAYMOND	81772	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ORDERING, PRESCRIBING, DISPENSING, ADMINISTERING, OR POSSESSING SCHEDULE II CONTROLLED SUBSTANCES OR ANY CONTROLLED SUBSTANCES DEFINED BY THE CALIFORNIA UNIFORM CONTROLLED SUBSTANCES ACT EXCEPT FOR THOSE DRUGS LISTED IN SCHEDULES III, IV AND V, NOT TREAT PATIENTS WITH INTRACTABLE PAIN, OR SUPERVISE PHYSICIAN ASSISTANTS.	1/19/2012
SANDHU 1. Inappropriate and excessive prescribing of controlled substances to multiple patients	SURINDER	38536	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SANDHU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/19/2014
VAN MEURS 1. Inappropriate and excessive prescribing of controlled substances to multiple patients	DIRK	40574	ALAMEDA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY DAYS ACTUAL SUSPENSION. THIRTY DAYS SUSPENSION HAS BEEN SERVED. DURING PROBATION, DR. VAN MEURS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/19/2010
VUKSINICH 1. Three DUIs 2. Arrested at Oakland airport with meth and pipe in his carry-on bag.	MATTHEW	G43289	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VUKSINICH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
RASKIN 1. Excessive and inappropriate prescribing to more than one patient	GORDON	A45357	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II OR III CONTROLLED SUBSTANCES, WITH THE EXCEPTION OF METHADONE, AT BERKELEY ADDICTION TREATMENT SERVICES AND MEDICAL MARIJUANA RECOMMENDATIONS AND	

				SUBOXONE/BUPRENORPHINE, IN HIS PRIVATE PRACTICE FOR THE FIRST FOUR YEARS OF PROBATION, PROHIBITED FROM PRACTICING, PERFORMING OR TREATING PATIENTS FOR PAIN MANAGEMENT, ACUTE AND CHRONIC PAIN AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT DR. RASKIN IS PERMITTED TO SUPERVISE PHYSICIAN ASSISTANTS AT THE BERKELEY TREATMENT SERVICES CENTER ONLY.
<p>NGUYEN</p> <ol style="list-style-type: none"> 1. Not agreeing to psychiatric examination. 2. Prescribing dangerous drugs to multiple patients without appropriate prior examination. 	HAI	A44145	ALAMEDA	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT PRESCRIBE ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III UNTIL SUCCESSFUL COMPLETION OF A PRESCRIBING PRACTICE COURSE .
<p>KEANEY</p> <ol style="list-style-type: none"> 1. Alcohol addiction 2. DUI 3. His medical group restricted him from patient care 	JAMES	G54015	ALAMEDA	EFFECTIVE 12/02/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KEANEY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>ISOLANI</p> <ol style="list-style-type: none"> 1. Impaired for ability to safely practice medicine due to diagnosis of bipolar disorder, amphetamine and cannabis abuse. Arrested twice for bizarre behavior – revealed amphetamine and marijuana use and bipolar disorder. 	FRANCESCO	G85394	ALAMEDA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ADDERALL OR ANY AMPHETAMINE, SHALL NOT POSSESS OR USE MARIJUANA, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

<p>BUSS</p> <ol style="list-style-type: none"> 1. Gross negligence 2. Did not obtain prior medical records 3. Over prescription of narcotics 4. Failed to order needed labs/tests 	RICHARD	52995	AMADOR	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BUSS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/20/2015
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AZEVEDO 1. Has a physical impairment which affects the ability to perform surgery.	ALAN	32695	BUTTE	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING SURGERY, SURGICAL ASSISTING, OR THE USE OF FLUOROSCOPY, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	9/18/2015
GRAY 1. Having sexual relations with a patient.	JEFFREY	56251	BUTTE	EFFECTIVE 12/07/06 LICENSE SURRENDERED; EFFECTIVE 06/10/11 LICENSE REINSTATED AND PLACED ON SIX YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GRAY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/10/2011
MORGAN 1. Negligence by interfering with emergency medical personnel. 1. Failure to properly diagnosis several patients.	LOREN	23681	BUTTE	EFFECTIVE 10/14/08 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 09/05/14 NEW DECISION EXTENDS PROBATION FOR FIVE YEARS WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: MAY ONLY PERFORM SURGERIES IN AN ACCREDITED HOSPITAL, HOSPITAL-RUN OUTPATIENT SURGERY CENTER OR AN ACCREDITED OUTPATIENT SURGERY CENTER NOT OWNED BY DR. MORGAN, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND DURING THE FIRST YEAR OF PROBATION, HE SHALL HAVE AN ONSITE SURGICAL PROCTOR PRESENT FOR ALL SURGICAL PROCEDURES THAT HE PERFORMS.	9/5/2014

JOHNSON 1. Failed to properly prescribe, monitor and inform patient of 4 different medications. 1. Deviating from the standard care of narcotic pain medications.	MEGAN	G61655	BUTTE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. JOHNSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT WHILE SHE IS EMPLOYED AT IMMEDIATE CARE, IMMEDIATE CARE MEDICAL CENTER AND ITS AFFILIATES.
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LAL 1. Engaged in sexual misconduct with a patient.	MUNISH	A85179	BUTTE	SEVEN YEAR PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FIFTEEN DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 07/24/16 UNTIL 08/06/16. DURING PROBATION, DR. LAL SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.
AFRASIABI 1. 3 convictions of drinking and driving - DUI.	ARDAVAN	C52848	BUTTE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. AFRASIABI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

BURT 1. Was working at Correctional Facility Medical Facility in Vacaville – took medication and said he was going to use on patients but used on himself: two vials of Demerol, two vials of meperidine,	GREGORY	55166	COLUSA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE.	6/14/2013
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BUCKLEY 1. Falsified precriptions to obtain Norco 2. Opioid and alcohol abuse	ROBERT	73194	CONTRA COSTA	EFFECTIVE 02/28/14 CANNOT PRACTICE MEDICINE UNTIL A WORKSITE MONITOR IS APROVED BY THE BOARD. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 03/16/14 UNTIL 05/16/14. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	2/28/2014
CHIU 1. Negligence in care of multiple patients 2. baby died during delivery 3. woman died during surgery	KWANG	37989	CONTRA COSTA	TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CHIU IS PROHIBITED FROM PRACTICING OBSTETRICS.	3/6/2002

HADLEY 1. Alcohol Abuse 2. Multiple criminal convictions of driving under the influence	JOHN	40172	CONTRA COSTA	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	8/29/2013
JAIN 1. Negligence in care of multiple patients through departure from standards of care; 2. inaccurate record keeping; 3. gave false/misleading statements concerning events	SUPRABHA	67699	CONTRA COSTA	CASE NO. 12-2009-197864 EFFECTIVE 04/07/14 THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. JAIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 09/17/15 NEW DECISION EXTENDS PROBATION TO 04/07/18 WITH VARIOUS TERMS AND CONDITIONS.	9/17/2015
JOHANNESSEN* *completed probation on 6/28/16 1. Negligence in treatment of patient and recording clinical information – patient died	HELGE	52478	CONTRA COSTA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. JOHANNESSEN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/28/2013
JOHNSON 1. Gross negligence in deviation from standard of care for patient 2. Failure to maintain accurate records 3. Incompetence in care of patient	WILLIAM	46239	CONTRA COSTA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. JOHNSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/29/2012
LEON 1. Inappropriate relationship with former patient 2. Unaware of ethical standards for psychiatric practice	RONALD	40420	CONTRA COSTA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/19/2013
LEWIS 1. Negligence and incompetence in over prescribing multiple patients without proper examination, documentation to support diagnoses or record of treatment plans	STEPHEN	20175	CONTRA COSTA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEWIS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/5/2012

2. Self-prescription of controlled substances (testosterone oil)					
ORENGO-MCFARLANE 1. Inappropriate and negligent over prescription of opioids to patient with history of narcotics abuse. 2. Patient died of overdose.	MICHELLE	108738	CONTRA COSTA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ORENGO-MCFARLANE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/7/2015
SREENIVASAN* *license revoked – pending appeal 1. Negligence, over prescription of drugs to patients without proper evaluation/record keeping 2. Unprofessional conduct while on probation	PURNIMA	82039	CONTRA COSTA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	11/16/2015
STANDEFER 1. Convicted of driving under the influence of alcohol and dangerous use of alcohol	CHARLOTTE	78053	CONTRA COSTA	EFFECTIVE 04/07/16 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. STANDEFER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 09/02/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE.	4/7/2016
VERGARA 1. Negligent care of patient, failure to keep adequate records – patient died	FELIX	74444	CONTRA COSTA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VERGARA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/26/2015

ALLEN 1. Cocaine addiction during 80s and 90s 2. Using cocaine at work at Pelican Bay State Prison in 2005 3. Failed to pay for and comply with	EVERETT	54881	DEL NORTE	TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	7/5/2013
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probation drug testing					
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ANDREW 1. Negligent in care of multiple patients including two who died from heart surgery issues.	HYGIN	38710	FRESNO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ANDREW IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/31/2014
BIANCHI 1. Sexual misconduct with at least three patients	ANTHONY	63365	FRESNO	EFFECTIVE 01/17/14 CASE NO. 09-2009-200868 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 02/03/14 THROUGH 03/05/14. EFFECTIVE 06/16/16 NEW DECISION FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS SHALL RUN CONCURRENT WITH THE CURRENT PROBATION. RESTRICTIONS: PROHIBITED FROM SEEING, CONSULTING WITH, ATTENDING, PRACTICING MEDICINE ON OR TREATING ANY AND ALL FEMALE PATIENTS, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	1/17/2014
JANDA 1. Removed wrong bone from patient's foot while in surgery 2. altered patient medical chart after he found out 3. Negligent care of two patients	JOHN	37510	FRESNO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. JANDA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/16/2015

KALEKA 1. Sex with psychiatric patient 2. Negligent care of Liposuction patient during procedures	VIRENDE R	43546	FRESNO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KALEKA IS PROHIBITED FROM PRACTICING COSMETIC MEDICINE, WHICH INCLUDES BOTH INPATIENT AND OUTPATIENT COSMETIC SURGERY, ELECTIVE AND RECONSTRUCTIVE PLASTIC SURGERY AND AESTBETIC MEDICINE.	3/30/2016
LEE 1. Negligence with patient's weight loss treatment	CHAN	89666	FRESNO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/14/2015
LEE 1. Driving under the influence of alcohol on two separate occasions.	JAMES	84634	FRESNO	EFFECTIVE 08/08/14 CASE NO. 06-2010-209703 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 07/17/15 CASE NO. 06-2013-233731 ADDS AN ADDITIONAL ONE YEAR PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 09/30/16 NEW DECISION ADDS TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/17/2015
MALLADA 1. Negligent care of a patient during labor which led to death.	DAN	43360	FRESNO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIX MONTHS ACTUAL SUSPENSION WHICH BEGAN ON 06/26/01, THE DATE THE INTERIM SUSPENSION ORDER WAS ISSUED. SUSPENSION SERVED 06/26/01 UNTIL 12/26/01. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	12/20/2001

SALAZAR	ROBERT	42244	FRESNO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	2/3/2012
<ol style="list-style-type: none"> 1. Prescribing drugs to a patient without examination 2. Driving under the influence with his child in the car 3. Arrested for being drunk in public 					
VERMA	PREETI	81494	FRESNO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRESCRIBING, ORDERING OR PERFORMING ANY LIPOSUCTION PROCEDURE AS A METHOD OF PATIENT TREATMENT AND SUPERVISING PHYSICIAN ASSISTANTS.	4/19/2012
<ol style="list-style-type: none"> 1. Negligent care of Liposuction patient during procedures 					
WEILERT	MICHAEL	38379	FRESNO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WEILERT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/26/2016
<ol style="list-style-type: none"> 1. Committing fraud in a real estate transaction 2. Using fake medical records so his wife would not have medical bills 	L				
OSTOYA	PAUL	A52252	FRESNO	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND MUST HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.	
<ol style="list-style-type: none"> 1. Unprofessional conduct - Took female patient out to drinks to talk about sex issues with her partner 2. Sexual harassment and disruptive conduct – made several comments on multiple occasions to nurse at hospital and would often inappropriately touch her 					
DO	TRI	A55472	FRESNO	FOUR YEARS PROBATION	
<ol style="list-style-type: none"> 1. Convicted of misappropriation of public funds by a 					

<p>county officer – used \$50k for personal use from research grant money from the American College of Radiology that was supposed to be for Santa Clara Valley Medical Center</p>				<p>WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, HE DO IS PROHIBITED FROM THE MANAGEMENT OF AND/OR HAVING FIDUCIARY RESPONSIBILITIES FOR ANY GRANT AND/OR RESEARCH MONEY AND SHALL NOT PERSONALLY APPLY FOR GRANT/OR RESEARCH MONEY.</p>
<p>FANTONE</p> <ol style="list-style-type: none"> 1. Arrested upon entering Coalinga State Hospital because he was under the influence of controlled substance – tested positive for meth and baggy of meth found in car. DOJ also did a urine test that was positive for meth and cocaine. 	EMMANUEL	A61097	FRESNO	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, HE FANTONE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>
<p>RAD</p> <ol style="list-style-type: none"> 1. Negligent care of multiple patients – didn't do proper exams and proper management of their problems – and didn't keep proper documentation. 	BEN	A40892	FRESNO	<p>THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, HE RAD IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>
<p>DOMINGUEZ</p> <ol style="list-style-type: none"> 1. Two DUI convictions: .19 BAC and .20 BAC – hit a parked care and kept driving 	RONALD	A114123	FRESNO	<p>FOUR YEARS PROBATION WITH VARIOUS</p>

	in one case. 2. Examined by psychiatrist in 2015 – found that he suffers from substance abuse disorder.				TERMS AND CONDITIONS.
MASON	1. During a surgery to remove ovarian cysts she accidentally removed fallopian tubes of 25 year old patient who wanted kids. 2. During post operative visit, she didn't inform patient about the accidental fallopian tube removal. 3. Patient didn't find out until three years later from a nurse who reviewed her medical records.	JILL	C51600	FRESNO	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, MASON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
CIRESI	1. Four DUIs	KEVIN	G60858	FRESNO	EFFECTIVE 11/10/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, CIRESI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

DUKE	HENRY	97274	IMPERIAL	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DUKE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/9/2012
1. Worked at Centinela Sate Prison – negligent in care of multiple patients 2. Created false medical record with fraudulent intent					

<p>FREESEMANN</p> <ol style="list-style-type: none"> 1. Carrying a firearm in a vehicle 2. Transporting and possessing controlled substances (cocaine, ecstasy and methamphetamine) 	JEFFREY	83122	KERN	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FREESEMAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/19/2010
<p>LIEPMANN</p> <ol style="list-style-type: none"> 1. Prescribed inappropriate doses of medication 2. Medical care deviated from accepted standards 	PETER	89383	KERN	ONE YEAR PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LIEPMANN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/21/2014
<p>MCDONNELL</p> <ol style="list-style-type: none"> 1. Substance abuse 2. License revoked for failing to comply with probation. 	JAMES	63465	KERN	EFFECTIVE 01/08/16 CANNOT PRACTICE MEDICINE PENDING PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	1/8/2016
<p>MELENDEZ</p> <ol style="list-style-type: none"> 1. Gross negligence 2. Failed to record key information in medical records 	PHILIPP	51130	KERN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MELENDEZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/13/2015
<p>NADJMABADI</p> <ol style="list-style-type: none"> 1. Several counts of sexual abuse and misconduct 2. Multiple counts of sexual harassment 3. Performed exams on women in public area without gloves 4. Didn't offer gowns to women who undressed. 5. Asked women to 	ESMAIL	56456	KERN	EFFECTIVE 01/15/10 LICENSE SURRENDERED; EFFECTIVE 07/22/15 LICENSE REINSTATED AND PLACED ON SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN	7/22/2015

completely undress for exams not needed 6. Solicited dates from a patient				ASSISTANTS AND SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING ANY AND ALL FEMALE PATIENTS.	
SHAH 1. Gross negligence 2. Departure from standard of care 3. Altered medical records 4. Vandalized vehicles	BIHARI	37529	KERN	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 01/05/13 UNTIL 03/05/13. DURING PROBATION, DR. SHAH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	12/20/2012
SHARMA 1. Gross negligence 2. Failed to keep adequate medical records.	RAHUL	72532	KERN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SHARMA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/7/2015
THATIPELLI 1. Failed to maintain adequate and accurate records (multiple patients) 2. Departed from standard of care (multiple patients)	MALLIK	53592	KERN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. THATIPELLI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/15/2014
XIONG 1. Gross negligence 2. Failure to perform an exam before treating and prescribing 3. Deviated from standard of care 4. Medical records were in code and not understandable and contradictory	SHIQUAN	102651	KERN	EFFECTIVE 04/24/15 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 09/26/16 CEASE PRACTICE ORDER ISSUED- NO PRACTICE.	4/24/2015
MBAGWU 1. Did not properly take care of newborn baby resulting in baby's deteriorating condition – when	NNEAMAKA	A53749	KERN	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	

staff tried contacting her she did not respond and wasn't at the hospital – other doctors had to fill in				
RIOS 1. Convicted of filing false income tax return – tens of thousands of dollars 2. Convicted of conspiracy to commit insurance fraud	TOMAS	A54078	KERN	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 01/15/17 UNTIL 03/15/17. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.
ACCETTA 1. Negligent care of patient - Botched breast surgery – patient had to get another doctor to fix procedure – sustained tachycardia during procedure.	AUGUST	G61628	KERN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND DURING THE FIRST TWO YEARS OF PROBATION, DR. ACCETTA IS PROHIBITED FROM PRACTICING COSMETIC SURGERY.

LEON 1. Fighting with others in front of bar – sprayed by pepper spray from officer – ran from officer – intoxicated from alcohol – spent night in jail – no charges filed. 2. Negligent care of patients – not doing proper exams – departure from standard of care.	SAMUEL	73337	KINGS	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/30/2012
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HOPKINS 1. Excessive and inappropriate prescribing to multiple patients	MILAN	34406	LAKE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HOPKINS IS PROHIBITED	4/11/2014
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2. Police found meth, marijuana and mushrooms at his house				FROM SUPERVISING PHYSICIAN ASSISTANTS.	
CARTWRIGHT 1. Gross Negligence 2. Repeated Negligent Acts 3. Failure to keep adequate medical records	KENNETH	69363	LAKE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED. RESTRICTIONS: PROHIBITED FROM PRACTICING MEDICINE OUTSIDE OF ANESTHESIOLOGY, SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE. SUBSEQUENT THREE YEARS PROBATION CONSECUTIVE TO THE FIRST PROBATION TERM WITH VARIOUS TERMS AND CONDITIONS.	1/20/2016

ABAD-SANTOS 1. Prescribing dangerous drugs to four patients without proper medical examination 2. Improper evaluation of how prescribed drugs were affecting the patients' bodies	CRISELDA	105195	LOS ANGELES	EFFECTIVE 03/30/2012 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, FROM PRESCRIBING, FURNISHING OR PROVIDING SAMPLES OF NARCOTICS, DANGEROUS DRUGS OR CONTROLLED SUBSTANCES TO ANY FAMILY MEMBER; AND FROM TREATING, DIAGNOSING OR COUNSELING ANY FAMILY MEMBERS. EFFECTIVE 04/01/2015 NEW DECISION ADDS ONE YEAR TO CURRENT PROBATION TERM WITH THE SAME TERMS AND	4/1/2015
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				CONDITIONS.	
<p>ABEDI</p> <ol style="list-style-type: none"> 1. Prescribed various narcotics for himself 2. Driving under the influence - DUI 3. Prescribing without prior examination 	BABAK	95902	LOS ANGELES	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND PRESCRIBING RESTRICTIONS DESCRIBED IN THE DECISION.</p>	10/8/2014
<p>ABRAHAMS</p> <ol style="list-style-type: none"> 1. Failure to perform proper C-section which resulted in a newborn's death. 	ARIEL	86496	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	3/14/2016
<p>ANDERSEN</p> <ol style="list-style-type: none"> 1. Prescribed controlled substances for himself 2. Forged prescriptions for fictitious patients 	JARON	97202	LOS ANGELES	<p>EFFECTIVE 11/14/13 FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 11/30/13 THROUGH 12/30/13. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULE II, NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE AND</p>	7/23/2015

				PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 07/23/15 NEW DECISION ADDS AN ADDITIONAL ONE YEAR TO THE CURRENT PROBATION. ALL TERMS AND CONDITIONS OF THE 2013 DECISION CONTINUE TO APPLY UNTIL THE TERMINATION OF THE ENTIRE PROBATIONARY PERIOD.	
ANDERSON 1. Addicted to controlled substances that he has been prescribing for himself.	GREGORY	33010	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ANDERSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/22/2013
ARENAS 1. Prescribing controlled substances to a patient without proper medical examination	JESSE	37465	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ARENAS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/6/2014
BALASUNDARAM 1. Driving under the influence - DUI 2. Possession of cocaine	RAJ	107910	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BALASUNDARAM IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/9/2015
CALLAHAN 1. Driving under the influence of drugs 2. Possession of controlled substances	BARBARA	41130	LOS ANGELES	EFFECTIVE 11/27/13 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CALLAHAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 01/27/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE	1/27/2016

				BEGINS 01/30/16.	
CAREY 1. Charged with a felony for driving under the influence of alcohol	JOSEPH	87082	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CAREY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/16/2015
CARPENTER 1. Driving under the influence of alcohol 2. Drug abuse; THC and cocaine found in his bloodstreams 3. Prescribing controlled substances for himself.	THOMAS	53323	LOS ANGELES	EFFECTIVE 11/06/15 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CARPENTER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/6/2015
CASTANON-HILL 4. Health benefits fraud 5. Grand theft 6. Money laundering 7. Conspiring with aiding or abetting another in the unlicensed practice of medicine 8. Receiving stolen property	RITO	71843	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 11/06/11 THROUGH 12/06/11. DURING PROBATION, DR. HILL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/21/2011
CHAM 1. Gross negligence 2. Unprofessional conduct 3. Failed to meet terms of probation 4. Failed to maintain controlled substances medical records 5. Didn't perform exam before prescribing opioids/ didn't follow up after prescribing	DANIEL	86714	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS BEGAN ON 01/13/2012. DURING PROBATION, DR. CHAM SHALL NOT PARTICIPATE IN NOR PROVIDE TELEHEALTH SERVICES NOR TELEMEDICINE SERVICES OF ANY OTHER TYPE.	6/6/2012
CHOI 1. Reckless driving involving alcohol	AUDREY	123785	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND	11/21/2014

2. Did not report DUI conviction to the Medical Board				CONDITIONS. DURING PROBATION, DR. CHOI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
CLARK 1. Repeated negligent acts 2. Deviated from the standard of care re: opioid prescriptions and pain management plans	KERRY	60150	LOS ANGELES	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT FOR THOSE LISTED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/3/2016
COMDEN 1. Gross negligence 2. Wrote prescriptions for people who weren't her patients 3. Wrote prescriptions without exams 4. Wrote clearly excessive prescriptions 5. Personal use of controlled substances 6. Failed to meet multiple terms of probation 7. Missed scheduled drug testing 8. Failed to meet with probation monitor	SACHA	112824	LOS ANGELES	EFFECTIVE 11/25/15 CANNOT PRACTICE MEDICINE UNTIL PASSING EVALUATIONS AND PRIOR TO PROVIDING DIRECT PATIENT CARE, DR. COMDEN MUST ENROLL AND PARTICIPATE IN A CLINICAL TRAINING PROGRAM. SIX YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND ONE YEAR ACTUAL SUSPENSION. SUSPENSION HAS BEEN SERVED. DURING PROBATION, DR. COMDEN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/25/2015
COTSEN 1. Self-prescribing and use	THOMAS	79392	LOS ANGELES	THREE YEARS PROBATION WITH	7/17/2014

of drugs 2. Possession of cocaine				VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. COTSEN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
DANIEL 1. Gross negligence 2. Failed to perform adequate physical exams 3. Extreme departure of care 4. Ordered/performed tests not indicated by patient history	WINDGROVE	41152	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 09/12/12 UNTIL 10/11/12. DURING PROBATION, DR. DANIEL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/27/2012
DAVIS 1. Failed to disclose/materially misrepresented facts on a license application	SCOTT	75950	LOS ANGELES	EFFECTIVE 09/26/14 CANNOT PRACTICE MEDICINE PENDING COMPLETION OF AN EVALUATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	9/26/2014
DO 1. Plead guilty to aiding and abetting health care fraud Successfully completed probation.	KEVIN	76640	LOS ANGELES	TEN YEARS PROBATION WITH VARIOUS TERMS & CONDITIONS & ONE YEAR ACUTAL SUSPENSION. SUSPENSION SERVED 01/01/06 TO 01/01/07. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS & NO SOLO PRACTICE OF MEDICINE.	12/16/2005
DOMINGUEZ 2. Operated weight loss clinic – excessive prescribing of “off label” diet pills – did not conduct proper tests of patients - one of his patients died. 3. Negligent care of	STEVEN	48186	LOS ANGELES	EFFECTIVE 05/20/11, CASE NO. 04-2008-194446 CANNOT PRACTICE MEDICINE UNTIL SURRENDERING HIS DRUG ENFORCEMENT ADMINISTRATION (DEA) PERMIT FOR CANCELLATION	6/12/2014

another patient – not doing proper exams				TOGETHER WITH ANY STATE PRESCRIPTION FORMS AND ALL CONTROLLED SUBSTANCES ORDER FORMS. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. NEW DECISION EFFECTIVE 06/12/14, CASE NO. 04-2011-213646 ADDS ONE YEAR PROBATION TO BE SERVED CONSECUTIVELY TO THE CURRENT PROBATION ORDER WITH THE SAME TERMS AND CONDITIONS.	
DURAN 1. Gross negligence 2. sexual misconduct with a patient 3. over prescribing medication	PAUL	60506	LOS ANGELES	EFFECTIVE 07/29/05 LICENSE SURRENDERED; EFFECTIVE 02/28/13 LICENSE REINSTATED AND PLACED ON SIX YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND MUST HAVE A THIRD PARTY CHAPERONE WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.	2/28/2013
EISENKOP 1. Has a seizure disorder related to cancer therapy in 1996 2. Limitations on license – work hours limited to	SCOTT	41053	LOS ANGELES	EFFECTIVE 07/18/2014 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION; TEN YEARS PROBATION	7/18/2014

10 consecutive hours – must have a surgery assistant and another surgeon on call when operating				WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, MUST UTILIZE AN ASSISTANT SURGEON DURING SURGERIES AND MUST LIMIT HIS WORK RELATED HOURS TO PERIODS OF NO MORE THAN TEN CONSECUTIVE HOURS.	
ELGUINDY 1. Found guilty of assault by means of force likely to produce bodily injury	AUSTIN	86166	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	9/26/2012
EROSHEVICH 1. Dishonesty – false reporting, fraudulent billing, forging a signature of another doctor, committed perjury 2. Convicted of a misdemeanor for writing and picking up a prescription for a controlled substance for a false patient	KHRISTINE	37980	LOS ANGELES	EFFECTIVE 03/30/2012 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 05/14/12 UNTIL 08/12/12. DURING PROBATION, DR. EROSHEVICH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/30/2012
FARAHMAND 1. Inadequate records including incomplete histories 2. Inadequate examinations 3. Sexual abuse or misconduct with a patient	DARYOUSH	43240	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FARAHMAND SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE EXAMINING OR TREATING FEMALE PATIENTS.	12/16/1998
FLEMING 1. Convicted of driving under the influence of alcohol, and convicted of urinating in public	WILLIAM	97279	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FLEMING IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/26/2014

<p>FLORES</p> <ol style="list-style-type: none"> 1. Conviction of a crime – charged with eleven counts of violating Welfare and Institutions Code section 14107 2. Gross negligence – patient exam should have been performed by a medical professional 	<p>BYRON</p>	<p>52173</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 05/02/08 LICENSE REVOKED; EFFECTIVE 08/28/15 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. DURING PROBATION, DR. FLORES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>8/28/2015</p>
<p>FRANKEL</p> <ol style="list-style-type: none"> 1. Prescribed meds to a woman he was having a relationship with and her daughter without any exams records: adderall, Demerol. 2. After relationship ended, Dr would still write Adderoll prescriptions for the daughter but use for himself 3. Prescribed meds to another woman he was having a relationship with and her daughter: Adderall, hydrocodone, oxycodone 4. Self prescribing dangerous drugs: Lortab, klonopin, estazolam, hydrocodone bitartrate, clonazepam, hydrocodone, 	<p>ALLAN</p>	<p>34474</p>	<p>LOS ANGELES</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, EXCEPT TO PATIENTS REFERRED BY A MEDICAL PROFESSIONAL LICENSED BY THE MEDICAL BOARD OF CALIFORNIA AND AFTER PHYSICALLY EXAMINING THE PATIENT IN PERSON.</p>	<p>4/8/2016</p>
<p>GAMBLE</p> <ol style="list-style-type: none"> 1. Dishonesty – participated in a scheme to sell prescriptions to the drug users without medical justification; gave someone else their prescription pads so that 	<p>BRIAN</p>	<p>76121</p>	<p>LOS ANGELES</p>	<p>SEVEN YEARS PROBATION FROM 09/23/10, THE EFFECTIVE DATE OF THE BOARD'S PREVIOUS DECISION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY-FIVE (35) DAYS</p>	<p>8/29/2012</p>

<p>she could write prescriptions for two addicts that went to her house</p> <p>2. Excessive prescribing</p>				<p>SUSPENSION. SUSPENSION SERVED 09/14/12 THROUGH 10/18/12. DURING PROBATION, DR. GAMBLE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	
<p>GANDHI</p> <p>5. Repeated negligent acts</p> <p>6. Lack of knowledge</p> <p>7. Unlawful discrimination</p>	ANIL	30411	LOS ANGELES	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING BREAST REDUCTIONS AND MASTOPEXY PROCEDURES, SUPERVISING PHYSICIAN ASSISTANTS AND SHALL PROVIDE APPROPRIATE REFERRALS OF HIV AND/OR AIDS PATIENTS TO OTHER PHYSICIANS OR FACILITIES.</p>	3/11/2016
<p>GARABET</p> <p>1. Convicted of felonies – mail fraud – related to fraudulent Medicare billing</p> <p>2. Gross negligence in treatment of patients – failed to inform patients he was using a non-FDA-approved machine/failed to obtain written consent</p> <p>3. Failed to provide adequate records and reports</p> <p>4. Selected Lasik surgery for high-risk patient</p> <p>5. Performed hyperopia treatment prior to FDA approval</p> <p>6. Failed to perform preoperative pachymetry</p> <p>7. Revoked license reinstated with probation terms set</p>	ANTOINE	50394	LOS ANGELES	<p>EFFECTIVE 12/26/03 LICENSE REVOKED; EFFECTIVE 06/12/14 LICENSE REINSTATED; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GARABET IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	6/12/2014

<p>GATUS</p> <ol style="list-style-type: none"> 1. Multiple convictions - two involving alcohol and driving – one for possession of a dangerous weapon 2. Prescribing without performing examination, or documenting an examination was performed 3. Failure to advise patient of risks of medications 4. Prescribed controlled substances to people he knew or should have known were drug addicts 5. Excessively prescribed controlled substances 6. Violated drug laws 7. Did not utilize CURES reports to determine where patients were obtaining pain medications 8. Incompetence 9. Dishonesty 	<p>LEANDRO</p>	<p>45231</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 10/29/15 CANNOT PRACTICE MEDICINE UNTIL HE SURRENDERS HIS DEA PERMIT TO THE DRUG ENFORCEMENT ADMINISTRATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>10/29/2015</p>
<p>GAVEL</p> <ol style="list-style-type: none"> 1. Convicted of two misdemeanors – battery against a spouse/ex-spouse and intimidating or threatening a witness 2. Excessive use and abuse of alcohol 	<p>DAVID</p>	<p>97054</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GAVEL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>11/20/2015</p>
<p>GHAFUR</p> <ol style="list-style-type: none"> 1. Unprofessional conduct - Respondent entered into an agreement with the MBC to where she would receive money for serving the underserved. She did not hold up her end of the agreement and did not repay the Board. 2. Probation continued in 2013 - Probation terms weren't met - Patient 	<p>NAEEMAH</p>	<p>79585</p>	<p>LOS ANGELES</p>	<p>CASE NO. 20-2009-198969 EFFECTIVE 05/06/11 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GHAFUR IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. NEW DECISION EFFECTIVE 11/15/13 PLACES DR. GHAFUR ON PROBATION UNTIL 07/01/16 WITH THE SAME</p>	<p>11/15/2013</p>

has only paid \$200 of 26,718.34 owed – paying full amount was a condition of probation - Failed to complete an ethics course - Failed to submit quarterly declaration – Failed to be available for interviews by the Board				TERMS AND CONDITIONS AS THE PRIOR ORDER.	
<p>GILLESPIE</p> <ol style="list-style-type: none"> 1. Failure to perform examinations 2. Care provided not medically indicated nor reasonably necessary 3. Ordered inappropriate tests and laboratory studies 4. Inaccurate diagnoses 5. Prescribed surgery without adequate information 6. Failure to investigate patients' complaints 7. Inappropriate response to minor abnormalities on a test 8. Allowed LVN to write letter to insurance with missing and inaccurate information 9. Did not meet probationary terms – license further suspended 	LARRIAN	31664	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SUSPENSION. SUSPENDED UNTIL PASSING AN EVALUATION, AN EXAMINATION AND THE BOARD MUST APPROVE A PRACTICE MONITOR.	11/11/2002
<p>GLOUSMAN</p> <ol style="list-style-type: none"> 1. Examined areas that were not within his scope 2. Failed to document examinations on chart, inadequate medical records 3. Sexual exploitation of a patient - Touched patient's testicles and penis without wearing examination gloves on multiple occasions - Masturbated the patient until he ejaculated 	RONALD	45186	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING ALL PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/3/2014

<p>GOLDBERG</p> <ol style="list-style-type: none"> 1. Repeated negligent acts: prescribed antiviral and antifungal medications in a preventative manner where the patients did not exhibit symptoms for such medications or without adequate documentation 2. Engaging in or providing unapproved treatment without advising the patients or the patient's parents or obtaining an informed consent 3. Prescribing and continuing to prescribe SSRI medication in a preschooler notwithstanding the parent's concern and patient having demonstrated adverse side effects 	<p>MICHAEL</p>	<p>25404</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 02/14/14 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GOLDBERG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>2/14/2014</p>
<p>GOLDSTEIN</p> <ol style="list-style-type: none"> 2. Gross negligence of multiple patients 3. Repeated negligent acts 4. Incompetence 	<p>ARKADY</p>	<p>47751</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 12/30/2011 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRACTICING OBSTETRICS AND GYNECOLOGY AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 03/04/2014 CEASE PRACTICE ORDER ISSUED-NO PRACTICE BEGINS 03/07/2014.</p>	<p>3/4/2014</p>
<p>GORELIKOVA</p> <ol style="list-style-type: none"> 1. Criminal convictions for petty theft, battery and trespassing. 	<p>SVETLANA</p>	<p>102339</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY DAYS ACTUAL SUSPENSION TO BE SERVED BEGINNING 01/26/2014 THROUGH 03/26/2014. DURING PROBATION, DR. GORELIKOVA IS PROHIBITED FROM SUPERVISING</p>	<p>1/10/2014</p>

				PHYSICIAN ASSISTANTS.	
<p>GRAFF</p> <p>1. Overprescription of drugs to patient with history of drug abuse; negligence in patient care</p>	MARC	30278	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	8/16/2013
<p>GUIAMELON</p> <p>1. Conviction of paying illegal fees for the referral of patients Completed probation on 7/18/16</p>	RITA	84265	LOS ANGELES	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GUIAMELON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	5/17/2013
<p>GUZMAN</p> <p>3. Gross negligence in delivery of a baby that resulted in disabilities for the child</p> <p>4. Repeated negligent acts</p> <p>5. Incompetence</p> <p>6. Criminal conviction – MediCal fraud</p> <p>7. Unprofessional conduct</p>	EDUARDO	50344	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 11/16/12 UNTIL 12/15/12. DURING PROBATION, DR. GUZMAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	10/31/2012
<p>HERBST</p> <p>1. Convictions of crimes related to submitting fraudulent time sheets and receiving pay for medical work not performed at Salinas</p>	MARK	59419	LOS ANGELES	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HERBST IS PROHIBITED FROM SUPERVISING</p>	4/24/2014

Valley State Prison				PHYSICIAN ASSISTANTS.	
HIRSCH 1. Self-administration of controlled substances resulting in severe impairment during a surgery	JASON	114749	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HIRSCH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/18/2015
HUNT 1. Conviction of felony assault with a deadly weapon Probation completed 8/16/16	DAVID	48019	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HUNT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/16/2013
IMBER 1. License reinstated on a probationary period after surrendering in 1997 for repeated acts of administration of treatment and excessive use of diagnostic facilities	WAYNE	42323	LOS ANGELES	EFFECTIVE 08/21/97 LICENSE SURRENDERED; EFFECTIVE 05/20/11 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. IMBER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/20/2011
JACKSON 1. License was revoked due to an earlier conviction and was later reinstated and placed on probation. 2. During probation, conviction of unlawful use of a fake driver's license with mitigating circumstances	D	33174	LOS ANGELES	SUPERIOR COURT OF CALIFORNIA OVERTURNED PRIOR ORDER OF REVOCATION. EFFECTIVE 04/09/14 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	4/9/2014

<p>JAMES</p> <p>1. Reckless driving – drove car erratically down a thoroughfare, swerving across lanes and crossing intersections without stopping for red traffic signals; tried to turn into a parking lot but struck a raised median; blood tested positive for benzodiazepines</p>	<p>ELAINE</p>	<p>71988</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 05/28/15 CANNOT PRACTICE MEDICINE UNTIL PASSING EVALUATIONS; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND TWELVE (12) MONTHS ACTUAL SUSPENSION. SUSPENSION BEGINS 06/13/15 UNTIL 06/13/16. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>5/28/2015</p>
<p>KAMSON</p> <p>1. Previously had license revoked for sexually assaulting a patient. License was reinstated in 2006 and placed on probation for 10 years. <i>During probation license was suspended for 60 days due to violation of probation terms Probation completed on 9/10/16</i></p>	<p>ADETOKUNBO</p>	<p>43596</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 05/20/98 LICENSE SURRENDERED; EFFECTIVE 07/10/06 LICENSE REINSTATED AND PLACED ON TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND MUST HAVE A FEMALE THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS. EFFECTIVE 10/26/12 ORDERED TO REMAIN ON PROBATION WITH SIXTY (60) DAYS SUSPENSION BEGINNING 11/11/12 UNTIL 01/09/13.</p>	<p>10/26/2012</p>
<p>KAPOOR</p> <p>1. Negligence in patient care, failing to perform adequate examinations, develop a treatment plan or document patient visits; 2. excessive prescription of opioids</p>	<p>SANDEEP</p>	<p>65873</p>	<p>LOS ANGELES</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.</p>	<p>2/15/2013</p>

<p>KASSABIAN</p> <ol style="list-style-type: none"> 1. Alcohol and substance abuse, self-prescription of controlled substances, 2. DUI conviction 	ARMEN	96289	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KASSABIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/12/2014
<p>KAYVANFAR</p> <ol style="list-style-type: none"> 2. Repeated negligent acts 3. Excessive prescribing 4. unprofessional conduct 	JOHN	36821	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND PRACTICING OUTSIDE OF ORTHOPEDIC SURGERY.	11/21/2014
<p>KEREGHA</p> <ol style="list-style-type: none"> 2. Unprofessional conduct – substance abuse, taking left over medication from patients 	PATIENCE	51718	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KEREGHA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/16/2013
<p>KESHISHIAN</p> <ol style="list-style-type: none"> 2. Gross negligence 3. Repeated negligent acts 4. General unprofessional conduct 	ARA	55904	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KESHISHIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/11/2014
<p>KHUDATYAN</p> <ol style="list-style-type: none"> 1. Negligence – Did not refer patients as needed for their care and failed to order labs 	HRACH	60871	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	3/11/2015
<p>KIM</p> <ol style="list-style-type: none"> 1. Medical knowledge was insufficient during PACE evaluation 2. Failed the PACE evaluation after taking it the second time 	SUNG-JANG	40349	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL ONLY PRACTICE GENERAL PEDIATRICS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/28/2012

<p>KROOP</p> <ol style="list-style-type: none"> Excessive and inappropriate prescribing to patients including hydrocodone and lorazepam One of patients died 	RICHARD	36316	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KROOP IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/11/2015
<p>KUMAR</p> <ol style="list-style-type: none"> Gross negligence Repeated negligent acts (numerous patients) Incompetence 	KAIN	67882	LOS ANGELES	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT AT HIS PRACTICE LOCATIONS IN RIDGECREST AND ROSAMOND, CALIFORNIA.	7/24/2014
<p>KUON</p> <ol style="list-style-type: none"> Gross negligence in his care and treatment of one patient, failing to order an additional biopsy and failing to order arteriogram and venogram studies before surgery to remove a tumor, failing to cancel surgery when an assistant surgeon could not be procured - The patient died following surgery. 	RALPH	39928	LOS ANGELES	EFFECTIVE 06/01/05 SURRENDER OF LICENSE; EFFECTIVE 04/11/14 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	4/11/2014
<p>KURIAN</p> <ol style="list-style-type: none"> Gross negligence: patient died; physician failed to recognize patient's risk of thrombosis, failed to anti-coagulate patient in the weeks following the c-section of her twins 	LEONARD	70489	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KURIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/8/2015
<p>LEE</p> <ol style="list-style-type: none"> Gross negligence for not performing the appropriate exams on a patient; failed to refer a patient to a specialist 	NICK	61218	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEE IS PROHIBITED FROM	4/11/2015

when needed 2. Did not monitor the patient's vital signs especially when there was an infection				SUPERVISING PHYSICIAN ASSISTANTS.	
LEMUS 1. Convicted of tax evasion	JAMES	42274	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY(30) DAYS ACTUAL SUSPENSION.	2/8/2013
LI 1. License was suspended in Mississippi due to excessive prescription of controlled substances and unethical activity	ZIZHUANG	104536	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/14/2014
LIFSON 1. Conviction of a crime – fail to file corporate income tax returns 2. Failure to report conviction 3. Dishonest acts	ROBERT	45355	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LIFSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/8/2014
LIN 1. Medi-Cal fraud; fraud in medical documents; 2. inappropriate dispensing of controlled substances and negligence in patient care; 3. self-prescribing; 4. violation of a court	THOMAS	64211	LOS ANGELES	TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 08/28/15 THROUGH 11/26/15. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO	8/12/2015

order restricting controlled substances prescribing privileges				PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS, FROM PARTICIPATING IN ANY MEDICAL PRACTICE INVOLVING WEIGHT LOSS, SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES AND SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES.	
LOBO 1. Negligence in care of patient, showing disregard for patient safety, a departure from the standard of care 2. Refusal to secure appropriate assistance before commencing with a procedure; 3. Dishonesty during disciplinary proceedings	CAROLYN	63239	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	1/3/2014
LOPEZ 1. Fell asleep during two medical procedures 2. Falsified documents	JOSE	39052	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LOPEZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/13/2003
MADRID 1. Excessive and inappropriate prescribing to several patients – massive amounts of opiates 2. Prescribing without proper exams and without determination if the patients were addicted	CECELIA	48480	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS, TREATING PATIENTS WITH CHRONIC PAIN	10/20/2011

				AND SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER OR POSSESS ANY CONTROLLED SUBSTANCES EXCEPT FOR THOSE DRUGS LISTED IN SCHEDULES III, IV AND V.	
MALIK 1. Dishonesty or corruption – falsified community service documents for community service probation requirement	MICHAEL YUSEF	69726	LOS ANGELES	PROBATION ORDER EFFECTIVE 06/22/07 FOR FIVE YEARS PROBATION AND SUSPENDED UNTIL 07/09/07 (SUSPENSION SERVED 06/22/07 TO 07/09/07) IS INCREASED FROM FIVE YEARS TO EIGHT YEARS WITH ADDITIONAL TERMS AND CONDITIONS.	6/3/2009
MALONE 1. DUI conviction, blood tested positive for cocaine and/or cocaine metabolics 2. Dishonest or corrupt acts – violating probationary conditions; denied using recreational drugs 3. Excessive use of alcohol or drugs	KIMBERLY	51398	LOS ANGELES	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MALONE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/29/2012
MARDELLI 1. Sexual misconduct of patient – touched patient inappropriately and kissed her 2. Gross negligence – puts hands on medical assistant’s shoulders and kissed her while also in the presence of a patient 3. Practicing medicine under an assumed name – physician did not practice under exact name issued for medical license	ISKANDAR	39055	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY DAYS ACTUAL SUSPENSION. PRECEDENT CONDITION-COMPLETION OF CLINICAL ASSESSMENT OR EDUCATIONAL PROGRAM EQUIVALENT TO THE PHYSICIAN ASSESSMENT AND CLINICAL EDUCATION PROGRAM (PACE). DR. MARDELLI IS IN A DISABLED STATUS, IF HE REINSTATES HIS LICENSE TO ACTIVE STATUS, ALL REQUIREMENTS OF THIS	9/16/2010

				DECISION WILL APPLY TO HIM AND THE PERIOD OF PROBATION WILL COMMENCE ON THE DATE OF RETURN TO ACTIVE STATUS.	
MARIANO 1. Gross negligence in his care for patient by ordering and performing of an abdominal ultrasound examination prior to obtaining a medical history or performing a physical examination 2. Billed patient for procedures that were not performed	ROBERTO	73610	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MARIANO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/21/2015
MARKMAN 1. Gross negligence 2. Improper administration of controlled substances to a person experiencing pain – administered a wide variety of drugs to his daughter in the house they share, she then administered the drugs which created a risk of death and serious injury	ROBERT	27953	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MARKMAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	12/24/2015
MARTELLO 1. Balance billing – aggressive collection efforts, including litigation caused the involved patients to expend significant amounts of time and money communicating with their insurance companies and hiring lawyers to defend against her claims	JEANNETTE	66298	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MARTELLO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/16/2013
MEHRTASH 1. Patient died – grossly negligent for care of the patient in the ER	ATA-OLLAH	38016	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MEHRTASH IS	12/4/2015

				PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
MELSON 1. Convicted of failure to file income tax return	ENRICO	59473	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	9/13/2013
MICHELENA 1. Naval Hospital in Florida – found guilty of conspiracy to commit robbery and aggravated assault	JORDAN	101937	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MICHELENA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/4/2015
MILLER 1. Treatment of patients while intoxicated 2. Alcohol and Vicodin dependency 3. Performed c-section while intoxicated then refused to be tested after surgery 4. Came back to hospital with someone else's urine and submitted it for test. 5. Finally agreed to blood test 4 hours after surgery which showed .13 alcohol BAC 6. Kicked out of a couple of treatment centers in Georgia 7. After being put on probation continued to test positive for alcohol / relapsing	GLENN	29077	LOS ANGELES	EFFECTIVE 03/17/05 LICENSE REVOKED; EFFECTIVE 11/19/09 LICENSE REINSTATED AND PLACED ON SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL PERFORM SURGERIES ONLY AT HOSPITALS WHERE PROVISIONAL OR FULL STAFF PRIVILEGES HAVE BEEN GRANTED.	11/19/2009
MITZELFELT 1. Unprofessional conduct: Gross negligence (multiple patients)	H	19853	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MITZELFELT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/1/2013
MONTENEGRO 1. Aiding and Abetting the Unlicensed Practice of Medicine	CARLOS	48811	LOS ANGELES	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING	4/16/2014

				PROBATION, DR. MONTENEGRO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
MORA 1. Negligence for overprescribing of Vicodin/Norco and OxyContin to patient who eventually died	LAWRENCE	71399	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II CONTROLLED SUBSTANCES UNTIL COMPLETION OF A PRESCRIBING COURSE.	5/27/2015
MULL 1. Physician assaulted his own psychiatrist and colleague 2. Physician was diagnosed with severe mental disorders	BRENDAN	74733	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS & CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE & FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/8/2008
NAJI 1. Convicted of assault with a deadly weapon (automobile) – hit construction worker	MOHAMMED	51126	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. NAJI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/18/2012
NGUYEN 1. Negligent in care of multiple patients	JOHN	109246	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	2/28/2014

<p>NUGENT</p> <ol style="list-style-type: none"> 1. DUI conviction – found empty alcohol bottle and xanax and alprazolam in car 2. Alcohol problem – intoxicated at work (hospital) 3. Overdosed on alcohol and Xanax – son had to call 911 4. Opened Medical Hair Restoration of Beverly Hills under fictitious name - allowed unlicensed individual to perform medical services 	<p>LUIS</p>	<p>47906</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 05/03/13 CASE NO. D1-2009-200935 SEVEN YEARS PROBATION COMMENCING 04/26/10 UNTIL 04/26/17 AND SEVENTY-FIVE (75) DAYS ACTUAL SUSPENSION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 11/13/14 CASE NO. 8002014006424 NEW DECISION ORDERS DR. NUGENT TO REMAIN ON SEVEN YEARS PROBATION WITH THE TERMS AND CONDITIONS SET FORTH IN THE PRIOR DISCIPLINARY ORDER, WHICH THE SEVEN YEARS WILL BEGIN ON 11/13/14.</p>	<p>11/13/2014</p>
<p>NWAIGWE</p> <ol style="list-style-type: none"> 1. Convicted of violating revenue and taxation code 2. Sexual misconduct – patient came in for anxiety consultation and Dr pulled her pants down and did pelvic exam and put his hands on her clitoris – then asked patient out on a date. Patient reported incident to police. 3. Over prescribing to 3 undercover patients and many other regular patients 	<p>MANASSEH</p>	<p>42532</p>	<p>LOS ANGELES</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. NWAIGWE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>10/23/2014</p>
<p>NYMAN</p> <ol style="list-style-type: none"> 1. Inappropriate and excessive prescribing to patient – no medical records or exams explaining prescriptions 	<p>KENNETH</p>	<p>27055</p>	<p>LOS ANGELES</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. NYMAN IS PROHIBITED FROM</p>	<p>4/19/2013</p>

<ul style="list-style-type: none"> – patient found dead. 2. Excessive and inappropriate prescribing to multiple patients 				SUPERVISING PHYSICIAN ASSISTANTS.	
O'DAY <ul style="list-style-type: none"> 1. Used controlled substances from leftover patient medication 	STEVEN	53519	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. O'DAY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/26/2014
PASCALI <ul style="list-style-type: none"> 1. Failing to properly treat a patient for their diagnosis and administering unnecessary injections 2. Failing to provide a history, physical and diagnostic of patient for diagnosis 	ALFREDO	33673	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PASCALI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	12/27/2013
PATEL <ul style="list-style-type: none"> 1. Providing medical marijuana prescriptions to undercover agents – not doing proper exams and proscribing without proper justification 2. Falsified medical records 	SONA	88229	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS ON 12/01/13 UNTIL 03/01/14. DURING PROBATION, DR. PATEL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/15/2013
PAYNE <ul style="list-style-type: none"> 1. Gross negligence and incompetence – failure to initiate pharmacological reversal of the paralytic agent Zemuron while attempting to reawaken patient; dishonesty about procedure and the patient died 	BROWNELL	26350	LOS ANGELES	EFF. 05/15/09 FIVE YEARS PROBATION WITH SIXTY DAYS SUSPENSION. SUSPENSION SERVED 7/13/09 TO 9/10/09. EFF. 12/3/10 PROBATION INCREASED FROM FIVE YEARS TO SIX YEARS. EFF. 03/21/13 PROBATION IS EXTENDED FOR AN ADDITIONAL TWO YEARS. ALL OTHER TERMS AND CONDITIONS OF THE 2009 AND 2010 DECISION CONTINUE TO APPLY UNTIL THE TERMINATION OF THE	3/21/2013

				ENTIRE PROBATIONARY PERIOD.	
<p>PEARSALL</p> <ol style="list-style-type: none"> 1. Gave patient drugs for vaginal delivery even though she already had two prior c-sections instead of the recommended course which is to perform a third c-section. 2. Did not respond to calls and pages when the patient was about to deliver so another doctor had to perform delivery. 3. Was not present for another complicated pregnancy – a 17yr old with twins – he failed to assign another physician – left a high-risk patient without a managing obstetrician in the face of an acute complication in a high-risk pregnancy. 4. Backdated reports for multiple patients making it seem like he was there for the delivery when he was not. 5. In another case of negligent care, a mother lost one of her twins – Dr did not have her in the right intensive monitoring setting knowing that she was a high risk pregnancy. 	ELDRIDGE	35490	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PEARSALL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/10/2010

<p>PERIC</p> <ol style="list-style-type: none"> 1. Negligent care of patient – excessive and inappropriate prescribing – not doing proper tests and exams. 2. Excessive and inappropriate prescribing to multiple patients – not performing exams and discussing drug risks 	JOHN	79419	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III, EXCEPT FOR ADDERALL AND TESTERONE, DURING THE FIRST TWO YEARS OF PROBATION, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	8/8/2014
<p>PETERSON</p> <ol style="list-style-type: none"> 1. Abuse of controlled substances and dangerous drugs 2. stole drugs at clinic for personal use 3. Used drugs while working 	RYAN	103097	LOS ANGELES	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR MARIJUANA FOR MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	6/21/2013
<p>PHAM</p> <ol style="list-style-type: none"> 1. Prescribing controlled substances without medical examination 	TIMOTHY	81541	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PHAM IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	7/24/2015

<p>PUTTA</p> <ol style="list-style-type: none"> 1. prescribing dangerous drugs without prior medical examination 2. Incorrectly diagnosed several patients from 'lack of knowledge' 	LAKSHMIDEVI	77357	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PUTTA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/25/2015
<p>RADEMAN</p> <ol style="list-style-type: none"> 1. Engaged in a sexual relationship with a patient 2. Wrongful financial transactions with three patients 	ALAN	27960	LOS ANGELES	EFFECTIVE 02/22/2005 LICENSE SURRENDERED; EFFECTIVE 08/12/2011 LICENSE REINSTATED; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RADEMAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/12/2011
<p>REMEDIOS</p> <ol style="list-style-type: none"> 1. Gross negligence: did not properly notify patient of medication side effects; did not follow up with patient and did not inform patient of when to discontinue the use of medicine; patient continued to develop which ultimately resulted in severe rhabdomyolysis and renal failure 	ELIZABETH	55283	LOS ANGELES	EFFECTIVE 10/31/12 CASE NO. 17-2010-206457 SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 06/26/15 NEW DECISION IN CASE NO. 17-2011-217295 THREE YEARS PROBATION TO RUN CONCURRENT WITH THE PROBATION TERM IN PREVIOUS CASE. DURING PROBATION, DR. REMEDIOS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/26/2015
<p>RINZLER</p> <ol style="list-style-type: none"> 1. Excessively prescribed dangerous and controlled drugs to multiple patients 	GARY	67994	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RINZLER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/19/2014
<p>RODRIGUEZ</p> <ol style="list-style-type: none"> 1. Dishonest on his application for medical privileges to Physician's' for Health Hospitals. 	HECTOR	92346	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RODRIGUEZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/29/2016

<p>RONAN</p> <ol style="list-style-type: none"> 1. Sexual relationship with a patient 	<p>KEVIN</p>	<p>77176</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 11/19/09 LICENSE REVOKED; EFFECTIVE 01/10/14 LICENSE REINSTATED; CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS AND MUST HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.</p>	<p>1/10/2014</p>
<p>ROYER</p> <ol style="list-style-type: none"> 1. Dangerous use of alcohol and controlled substances 2. Unable to practice safe medicine due to mental disorder 3. Convicted of driving under the influence DUI 4. Failure to comply/complete any of his mandatory probation 	<p>LYLE</p>	<p>34553</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 11/20/15 FULL INTERIM SUSPENSION ORDER ISSUED-NO PRACTICE. EFFECTIVE 05/11/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 05/27/16 UNTIL 08/25/16. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>5/11/2016</p>
<p>RUTHERFORD</p> <ol style="list-style-type: none"> 1. Caught drinking and passed out on the job 	<p>KEINO</p>	<p>80432</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RUTHERFORD IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>11/6/2015</p>

<p>SACHMAN</p> <ol style="list-style-type: none"> 1. Prescribed controlled substances to himself 2. Forged prescriptions of controlled substances 3. Violated the Drug statutes 4. Excessive prescribing 	<p>JASON</p>	<p>119972</p>	<p>LOS ANGELES</p>	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FIFTEEN (15) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 05/17/15 THROUGH 06/01/15. RESTRICTIONS: DURING THE FIRST FOUR YEARS OF PROBATION, DR. SACHMAN SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III., SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>5/1/2015</p>
<p>SACK</p> <ol style="list-style-type: none"> 1. Substance abuse problem; 2. wrote a fictitious prescription for himself for a controlled substance, 3. obtained controlled substances illegally 	<p>JEFFREY</p>	<p>47918</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 12/03/09 CANNOT PRACTICE MEDICINE PENDING PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SACK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>12/3/2009</p>
<p>SAFRANKO</p> <ol style="list-style-type: none"> 1. Driving under the influence alcohol and drugs DUI 	<p>BRENDA</p>	<p>45081</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SAFRANKO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>11/21/2014</p>

<p>SAJEDI</p> <ol style="list-style-type: none"> 1. Conviction of a crime – issuing a prescription for a controlled substance for a non-legitimate medical purpose 2. Failure to report conviction 3. Unprofessional conduct 	<p>EBRAHIM</p>	<p>62264</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 05/31/13 CASE NO. 05-2011-213229 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 08/07/15 NEW DECISION ADDS ONE ADDITIONAL YEAR TO CURRENT PROBATION WITH TERMS AND CONDITIONS. ALL TERMS AND CONDITIONS OF THE 2013 DECISION CONTINUE TO APPLY UNTIL THE TERMINATION OF THE ENTIRE PROBATION PERIOD.</p>	<p>8/7/2015</p>
<p>SCHANKMAN</p> <ol style="list-style-type: none"> 1. 36 counts of theft from MediCare (over \$25,000 worth) 	<p>ALAN</p>	<p>35202</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND ONE YEAR ACTUAL SUSPENSION. SUSPENSION BEGAN FROM THE DATE THE INTERIM SUSPENSION ORDER WAS ISSUED ON 12/14/94. SUSPENSION SERVED 12/14/94 UNTIL 12/14/95. RESTRICTIONS: CANNOT PRACTICE OPHTHALMOLOGY UNTIL PASSING AN EXAMINATION AND PROHIBITED FROM PARTICIPATING IN THE MEDICARE PROGRAM AND ANY STATE HEALTH CARE PROGRAMS UNLESS REINSTATEMENT IS LAWFULLY GRANTED.</p>	<p>9/21/1995</p>
<p>SEIDEMAN</p> <ol style="list-style-type: none"> 1. 3 counts of filing false tax returns 	<p>SUSAN</p>	<p>33438</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SEIDEMAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>10/21/2011</p>

SELA 1. Stimulating patients during a pelvic exam	MICHAEL	38986	LOS ANGELES	EFFECTIVE 03/08/95 LICENSE REVOKED; EFFECTIVE 02/22/06 LICENSE REINSTATED AND PLACED ON TEN YEARS PROBATION WITH VARIOUS TERMS & CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SHALL NOT CONDUCT PHYSICAL EXAMS OF FEMALE PATIENTS WITHOUT AN ADULT CHAPERONE PRESENT.	2/22/2006
SHAMLOO 1. Gross negligence and repeated negligent acts: did not prepare an operative report on the day of surgery; did not provide post-operative care for patient; made no plans for the patient to recover in a hospital but instead brought the patient to his house after the operation; he did not provide any post-surgery needs 2. Took patient to her hotel room the next day and left her alone; the patient was incoherent and unable to care for herself	JAMSHEED	55193	LOS ANGELES	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	10/29/2015
SHRIER 1. Criminal conviction – patients who were not eligible for PE were enrolled under false names –acts of dishonesty and corruption	PETER	86871	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 05/17/14 UNTIL 06/15/14. DURING PROBATION, DR. SHRIER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/1/2014

<p>SICIGNANO</p> <ol style="list-style-type: none"> Failed to appropriately use controlled substances in a manner that would not endanger the patient which resulted in a patient's death Failed to properly prescribe 2 patients, causing patients to be addicted to controlled substances (opiates) 	JOSEPH	21095	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRESCRIBING SCHEDULES II, III AND IV DRUGS, EXCEPT DR. SICIGNANO IS ALLOWED TO PRESCRIBE ADDERALL, RITALIN, PROVIGI, KLONOPIN, XANAX AND ATIVAN AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	11/22/2013
<p>SOFEN</p> <ol style="list-style-type: none"> Sexual exploitation of a patient Sexual relationship with a patient 	HOWARD	47799	LOS ANGELES	<p>THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SOFEN SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS, HOWEVER, WHEN FUNCTIONING AS A SUPERVISING ATTENDING PHYSICIAN IN A HOSPITAL SETTING, THIS REQUIREMENT IS WAIVED.</p>	4/8/2016
<p>SPELLER</p> <ol style="list-style-type: none"> Prescribing without a medical examination to two patients Aiding and abetting the unlicensed practice of medicine by delegating the medical examination for both fictitious patients 	CRISTAL	62390	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SPELLER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	4/11/2014
<p>STILLION</p> <ol style="list-style-type: none"> Gross negligence for prescribing excessive controlled substances for patients Repeated negligent acts: failed to keep adequate medical history or perform an adequate physical examination 	RODNEY	28244	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. STILLION IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	9/20/2013

<p>before determining the patient did not have an alcohol abuse problem</p> <ol style="list-style-type: none"> Failed to take an adequate medical history or perform adequate physical examination before prescribing controlled substances and other dangerous drugs for pain management Failed to refer patient to a pain specialist 					
<p>STONE Accusation file missing from Medical Board Website</p>	MILES	35367	LOS ANGELES	EFFECTIVE 05/10/99 CANNOT PRACTICE MEDICINE PENDING PASSING AN EVALUATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	5/10/1999
<p>SVADJIAN</p> <ol style="list-style-type: none"> Failure to perform an adequate history and physical examine the patient, on an ongoing basis Failure to appropriately evaluate, diagnose and manage the patient's chest pain and his diagnosis of coronary artery disease with no basis Ordered unnecessary diagnostic tests without medical indication to do so 	EDWARD	36685	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SVADJIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/20/2016
<p>SWERDLICK</p> <ol style="list-style-type: none"> Deviated from the standard of care by prescribing excessive amounts of medication to patients, not conducting the needed psychiatric patient 	PETER	40060	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SWERDLICK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/9/2011

evaluations					
<p>TAFOYA</p> <ol style="list-style-type: none"> 1. Patient died 2. Failed to perform a timely evaluation of patient 3. Failed to obtain and review the patient's previous medical records at the time of admission 	RICHARD	51639	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TAFOYA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANT.	8/29/2013
<p>TANK</p> <ol style="list-style-type: none"> 1. The PACE case review group concluded that the physician's performance in Phase I and Phase II had been substandard; there were deficiencies in diagnosis, documentation, information integration and symptom explanation, case formulation, attendance to psychosocial aspects, medical knowledge, and communication 	DAYALAL	53624	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TANK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/8/2014
<p>TINCOPA-MINAN</p> <ol style="list-style-type: none"> 1. Sexual exploitation of a patient: inappropriately sexually touched the patient 2. Took advantage of a vulnerable patient with many psychological problems 	LUIS	31264	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND 150 DAYS ACTUAL SUSPENSION. SUSPENSION WILL BE CREDITED FOR THE TIME THAT HE HAS SERVED PURSUANT TO THE INTERIM SUSPENSION ORDER ISSUED ON 06/10/13. SUSPENSION SERVED 06/10/13 UNTIL 11/07/13. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/31/2014

<p>TORRES-CIFUENTES</p> <ol style="list-style-type: none"> 1. Convicted of conspiring with and aiding and abetting another to practice medicine without a license; the unlicensed employee was allowed to dress in medical garb, to examine and treat patients, to request and order laboratory studies, to prescribe and dispense medications signed by the physician 	GUSTAVO	70962	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TORRES-CIFUENTES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/3/2014
<p>TU</p> <ol style="list-style-type: none"> 1. Failed to document the basis for frequent refills of opioids to patient 2. Failed to perform tests and/or examinations which would justify such extensive and repeated prescription opioids 3. Failed to perform urine screens 4. Failed to create opioid risk or depression scales 5. Failed to provide the patient with pain management agreement 6. Failed to refer the patient to outside physicians who could address the patient's medical issues 7. The records of this patient were inadequate and inaccurate 8. Over prescribing of opioids and Norco 	GENE	60067	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/25/2013
<p>UZUN</p> <ol style="list-style-type: none"> 1. Fabricated the administration of and creating needle elctromyography/nerve study reports which never occurred 2. Fabricated the administration of and creating carotid duplex study reports which 	GUVEN	72928	LOS ANGELES	EIGHT YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIX MONTHS ACTUAL SUSPENSION. SUSPENSION SERVED 05/09/2011 - 11/09/2011. DURING PROBATION, DR. UZUN IS PROHIBITED FROM SUPERVISING	4/22/2011

<p>never occurred</p> <p>3. Prescribed facet joint block injections with not anatomic diagnosis or evidence of facet joint disease or canal stenosis</p> <p>4. Alerting and modifying the medical records of the patient with no medical justifications, explanations, dates or initials</p> <p>5. Excessive prescribing, furnishing, dispensing or administering drugs or treatment and use of diagnostic procedures</p>				PHYSICIAN ASSISTANTS.	
<p>VESCO</p> <p>1. Prescribing pain medication on multiple occasions with little to no documentation of patients medical history</p>	DAVID	43384	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, FOR THE FIRST THREE YEARS, DR. VESCO SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES III, IV AND V AND SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES.</p>	7/31/2015
<p>VO</p> <p>1. Unprofessional conduct – arrested for possession of a controlled substance and for transporting a controlled substance</p>	NHAT	60568	LOS ANGELES	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS EXCEPT FOR BECQUIE</p>	4/16/2014

				BERKE AND THOMAS COLIVAS, WHO ARE CURRENTLY EMPLOYED BY HIM.	
VORPERIAN 1. Convicted of starting a kickback relationship with the owner of a clinical laboratory (Southwest Labs)	ADELINA	50390	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VORPERIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/19/2012
WANG 1. Gross negligence in dealing with surrogate patients.	FU	93089	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WANG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/2/2016
WARNER 1. Prescribing to an addict 2. Failure to complete his mandatory classes during probation	CLARENCE	62334	LOS ANGELES	EFFECTIVE 12/06/07 LICENSE SURRENDERED; EFFECTIVE 09/14/12 LICENSE REINSTATED; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WARNER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/14/2012
WILLIAMS 1. Arrested for reckless driving and failure to comply with officers 2. Arrested for domestic violence 3. Dishonest with the Medical Board investigators 4. False representation on multiple medical documents	MARK	80386	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 11/27/14 THROUGH 01/11/15. DURING PROBATION, DR. WILLIAMS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/26/2014
WITZLING 1. Failed to intervene in a timely manner when patients did not improve immediately after surgery for multiple patients	SANDY	30242	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE	3/4/2011

				SOLO PRACTICE OF MEDICINE WHILE ON PROBATION; HOWEVER, HE MAY REVIEW CHARTS AND RENDER OPINIONS (WHETHER AT HIS RESIDENCE OR ELSEWHERE) WHICH DO NOT INVOLVE PATIENT CARE WITHOUT VIOLATING THIS PROVISION.	
WONG 1. Violating state laws by allowing his assistant to prescribe controlled substances to patients.	DAVID	27287	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 12/07/14 THROUGH 01/20/15. RESTRICTIONS: PROHIBITED FROM SUPERVISING ANY ALLIED HEALTH PROFESSIONAL INCLUDING PHYSICIAN ASSISTANTS.	11/21/2014
ZAGHA 1. Negligent in prescribing controlled substances for the treatment of pain while failing to comply with the standard of care; excessive treatment and prescribing	MOISE	34602	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ZAGHA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/7/2016
KOENIG 1. Sexual misconduct; making unwanted advances on a patient; 2. criminal conviction of trespassing	PETER	A23943	LOS ANGELES	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
TARRYK <i>*has previously completed a probationary period</i> 1. Conviction of health care fraud in connection with	GEORGE	G14655	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND ONE YEAR ACTUAL SUSPENSION. SUSPENSION BEGINS 12/03/16	

a group defrauding Medicare				THROUGH 12/03/17. DURING PROBATION, DR. TARRYK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
BHUIYA 1. Aiding and abetting unlicensed practice and falsely represented facts in documents related to practice	AREF	A67793	LOS ANGELES	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BHUIYA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
TSAI 1. Negligence and incompetence in care of multiple patients, 2. providing controlled and non-controlled substances without prescriptions, 3. overprescribing drugs without proper evaluation and prescribing narcotics to known addicts	OLIVER	A49033	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II CONTROLLED SUBSTANCES, UNTIL SUCCESSFUL COMPLETION OF THE PRESCRIBING PRACTICE COURSE AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
MUELLER 1. Substance and alcohol abuse; 2. deemed unable to practice medicine due to chronic mental condition	GREGORY	A49185	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MUELLER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
MANJUNATH <i>*has completed a prior probation order in 1990</i> 1. Negligence and incompetence in care of several patients, failing to perform proper evaluations or make correct diagnoses	MADHURE	A29758	LOS ANGELES	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MANJUNATH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, UNLESS HE SUCCESSFULLY COMPLETES A CLINICAL TRAINING OR EDUCATION PROGRAM AND SUPERVISES PHYSICIAN ASSISTANTS ONLY IN A HOSPITAL SETTING.
ISSA 1. Negligence in care of multiple patients including improper evaluation, misrepresenting visits and treatments in notes and records and failing to properly diagnose patients	ADLY	A34603	LOS ANGELES	EFFECTIVE 12/02/16 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.

<p>KAZANCHIAN</p> <ol style="list-style-type: none"> 1. Negligence in care of multiple patients, prescribing opioids repeatedly without proper cause or evaluation and did not keep proper records of treatment 2. Unprofessional conduct with patient, getting involved in financial investment scheme and taking money from patient 	ARMEN	A53993	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KAZANCHIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>MILLER</p> <ol style="list-style-type: none"> 1. Sexual exploitation of a patient and conviction of same named crime 	SCOTT	A72857	LOS ANGELES	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND DURING THE FIRST TWO YEARS OF PROBATION, DR. MILLER IS PROHIBITED FROM TREATING FEMALE PATIENTS.
<p>MALDONADO</p> <ol style="list-style-type: none"> 1. Multiple DUI convictions 	DANIEL	A74326	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MALDONADO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>SHAMIE</p> <ol style="list-style-type: none"> 1. Negligence and incompetence in care of multiple patients, including: failure to maintain records and adequately document treatment, prescribing controlled substances to addicts, excessive prescription of controlled substances and charging patients for medications covered by insurance 	MOHAMMAD	A39228	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES III, IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>EILAT</p> <ol style="list-style-type: none"> 1. Negligence in ownership and operation of medical clinic, including: allowing laypersons to practice without onsite supervision, allowed the issuance of medical marijuana 	PAZ	A61038	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. EILAT IS PROHIBITED FROM OWNING A MEDICAL MARIJUANA CLINIC AND RECOMMENDING MEDICAL MARIJUANA.

<p>recommendation forms in name, did not properly evaluate employee credentials, did not give patients proper clinical evaluation</p>				
<p>BRAUNSTEIN</p> <ol style="list-style-type: none"> 1. Sexual relations with and exploitation of a patient; 2. violation of statutes regarding controlled substances 	MARK	G64033	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BRAUNSTEIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>DHALIWAL</p> <ol style="list-style-type: none"> 1. Negligence in care of several patients, including failing to induce labor in a patient under relevant circumstances leading to complications in delivery and improperly performing procedure on another patient leading to complications 	SIMMI	A63694	LOS ANGELES	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DHALIWAL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>LIN</p> <ol style="list-style-type: none"> 1. Medi-Cal fraud, fraud in medical documents, 2. inappropriately dispensing controlled substances, negligence in treatment of multiple patients, 3. engaged in misleading advertising, 4. self-prescribed controlled substances 	THOMAS	A64211	LOS ANGELES	EFFECTIVE 08/12/15 TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 08/28/15 THROUGH 11/26/15. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS, FROM PARTICIPATING IN ANY MEDICAL PRACTICE INVOLVING WEIGHT LOSS, SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES AND SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES. EFFECTIVE 08/25/16 AUTOMATIC SUSPENSION ORDER ISSUED-NO PRACTICE. BY OPERATION OF LAW, THE EFFECTIVE DATE OF THE ORDER

				IS 12/18/15.
<p>KIM</p> <ol style="list-style-type: none"> 1. Engaged in inappropriate sexual innuendo with patient, 2. negligence in care of patient, 3. failing to keep proper records and follow standard procedure for pregnant patient 	DAVID	G61312	LOS ANGELES	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS IN ALL LOCATIONS OTHER THAN HOSPITAL FACILITIES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>KHANLOU</p> <ol style="list-style-type: none"> 1. Unprofessional conduct, pursuing relationship with female employee eventually resulting in restraining order; 2. prescribing high dosage of opioids to close relative without proper exam; 3. falsification of medical records; 4. DUI conviction 	HOMAYOON	A66631	LOS ANGELES	EFFECTIVE 09/16/16 CANNOT PRACTICE MEDICINE UNTIL PASSING A CLINICAL DIAGNOSTIC EVALUATION. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRESCRIBING CONTROLLED SUBSTANCES AND DANGEROUS DRUGS TO HIS FAMILY MEMBERS, DOMESTIC PARTNERS OR ANY OTHER INDIVIDUAL WITH WHOM HE HAS A NON-FAMILIAL PERSONAL, DATING OR ROMANTIC RELATIONSHIP AND SUPERVISING PHYSICIAN ASSISTANTS.
<p>GABOIAN</p> <ol style="list-style-type: none"> 1. Negligence and unprofessional conduct in care of multiple patients, 2. making multiple diagnoses inconsistent with medical standards and 3. creating purposefully dishonest medical records 	KARINE	A80337	LOS ANGELES	EFFECTIVE 10/21/16 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION A CLINICAL TRAINING OR EDUCATION PROGRAM. THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 11/06/16 UNTIL 12/05/16. RESTRICTIONS: PROHIBITED FROM CONSULTING WITH AND SIGNING ANY IMMIGRATION AND/OR NATURALIZATION FORMS, USED BY ANY BRANCH OF THE FEDERAL OR ANY STATE

				GOVERNMENT ON BEHALF OF ANY PATIENT AND SPECIFICALLY BARRED FROM SIGNING AS THE PHYSICIAN ON ANY N-648 FORMS AND SUPERVISING PHYSICIAN ASSISTANTS.
PAYAWAL 1. Stealing and misusing controlled substances for himself and admitting to using substances while treating patients	JONATHAN	A103732	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PAYAWAL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
HAGGERTY 1. Self-prescribing controlled substances; 2. prescribing dangerous drugs to a relative without proper examination; professional dishonesty	SHERYL	A98050	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING THE FIRST YEAR OF PROBATION, DR. HAGGERTY IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE.
ROYER <i>*license has since been revoked</i> 1. Alcohol and substance abuse, DUI conviction, unable to practice safely due to mental disorder	LYLE	C34553	LOS ANGELES	EFFECTIVE 05/11/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 05/27/16 UNTIL 08/25/16. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 07/07/16 CEASE PRACTICE ORDER ISSUED- NO PRACTICE.
SUSSER <i>*has completed a prior probation</i> 1. Negligence in treatment of several patients, failing to adequately perform or document examinations or review of course of treatment; failure to keep adequate records	MURRAY	G22316	LOS ANGELES	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II CONTROLLED SUBSTANCES AND SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES.

<p>FISHMAN</p> <ol style="list-style-type: none"> 1. Negligence in care of 4 patients, failing to perform proper evaluations and pain assessments before excessively prescribing dangerous drugs to patients 	<p>EUGENE</p>	<p>G10992</p>	<p>LOS ANGELES</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND FOR THE FIRST TWO YEARS OF PROBATION, SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III FOR NEW PATIENTS.</p>
<p>EISENKOP</p> <ol style="list-style-type: none"> 1. Physical illness that affects competency to practice medicine – seizures 	<p>SCOTT</p>	<p>G41053</p>	<p>LOS ANGELES</p>	<p>EFFECTIVE 07/18/2014 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION; TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, MUST UTILIZE AN ASSISTANT SURGEON DURING SURGERIES AND MUST LIMIT HIS WORK-RELATED HOURS TO PERIODS OF NO MORE THAN TEN CONSECUTIVE HOURS. EFFECTIVE 06/16/16 NEW DECISION DEFINES LIMITATIONS OF WORK-RELATED HOURS AND FURTHER ADDS THAT A REGISTERED NURSE FIRST ASSISTANT MAY BE UTILIZED DURING SURGERIES.</p>
<p>TUCK</p> <ol style="list-style-type: none"> 1. Inability to practice safely, 2. self-prescription and abuse of narcotics; 3. convictions of writing fraudulent prescriptions 	<p>MICHAEL</p>	<p>G12700</p>	<p>LOS ANGELES</p>	<p>FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.</p>
<p>PATT</p> <ol style="list-style-type: none"> 1. Negligence in care of multiple patients, 2. excessively prescribing dangerous drugs without proper examination or record keeping; 3. prescribing controlled 	<p>STEPHEN</p>	<p>G47632</p>	<p>LOS ANGELES</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRESCRIBING SCHEDULES II, III, IV AND V OPIOIDS, WHICH INCLUDE OPIATES FOR A PERIOD OF THREE YEARS; AND SUPERVISING</p>

substances to addict who died of overdose				PHYSICIAN ASSISTANTS.
ROBERTS 1. Three convictions in relation to domestic violence and abuse	MICHAEL	G78949	LOS ANGELES	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ROBERTS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
DAUPHIN BAPTISTE 1. Negligence in care of multiple patients, failing to keep adequate records or properly examine patients before performing procedure and making extreme departures from standards of care	ROSELINE	G55469	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DAUPHIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
ABRAHAMS 1. Negligence and extreme departure from standards of care of a patient during delivery, baby died	ARIEL	G86496	LOS ANGELES	EFFECTIVE 03/14/16 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 06/30/16 CEASE PRACTICE ORDER ISSUED- NO PRACTICE BEGINS 07/06/16.
SACHDEV 1. License was revoked in Oregon for a variety of reasons relating to practice, including self-prescribing, prescribing to her husband and other patients without examination, failing to keep proper inventory of controlled substances in her possession	NAINA	G88925	LOS ANGELES	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND 180 DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 09/25/16 UNTIL 03/24/17. DURING PROBATION, DR. SACHDEV IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

MAYER 1. Air Force took action against his license – must obtain concurrence before providing all care, and must be supervised for all surgical procedures. 2. Deficiencies in his management and	JONATHAN	A88082	MADERA	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MAYER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
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<p>treatment of a number of obstetric patients, disruptive and unprofessional behavior with staff and peers in patient care settings.</p> <p>3. Failure to properly manage and treat a post-partum hemorrhage.</p>				
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BONSTEEL	ALAN	50164	MARIN	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	6/6/2013
1. Negligence in care of a patient					
COHN	BRUCE	21639	MARIN	EFFECTIVE 07/17/96 CANNOT PRACTICE MEDICINE PENDING PASSING AN EXAMINATION; THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	7/17/1996
1. Dermatologist – negligent care and treatment disclosure with multiple patients					
HARTNETT	JOHN	72166	MARIN	EFFECTIVE 03/06/08 SURRENDER OF LICENSE; EFFECTIVE 02/01/13 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF CLINICAL TRAINING PROGRAM. DURING PROBATION, DR. HARTNETT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/1/2013
1. Negligent care of two patients					
HULTER	HENRY	28193	MARIN	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HULTER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/5/2013
1. Inappropriate prescribing to one patient and inappropriate involvement with autopsy when patient died					
KATZ	STEVEN	71332	MARIN	EFFECTIVE 04/27/05 LICENSE REVOKED; EFFECTIVE 04/09/15 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	4/9/2015
1. Mistakenly transferred embryos into wrong patient – failed to disclose mistake to two patients and					

falsified records					
<p>RODGERS</p> <ol style="list-style-type: none"> 1. Unresponsive in home, husband called 911, ended up taking alcohol, Ativan, and ketamine (no prescription) 	RUTH	80909	MARIN	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	3/19/2015
<p>WINFIELD</p> <ol style="list-style-type: none"> 1. Issued fictitious prescriptions for self use of excessive amounts of Xanax, ambien, modafinil, and phentermine. 2. Convicted of drugged driving 	JULIE	55830	MARIN	EFFECTIVE 03/04/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITION. RESTRICTIONS: SHALL NOT PRESCRIBE, AUTHORIZE, ORDER, DISPENSE, ADMINISTER OR PROVIDE ANY DANGEROUS DRUGS OR CONTROLLED SUBSTANCES TO ANY MEMBER OF HER FAMILY OR HOUSEHOLD AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/4/2016

<p>CAPLAN</p> <ol style="list-style-type: none"> 1. Had elderly female patient give him \$10,000 loan 2. Created Nor Cal Health Care to give patients medical marijuana cards using remote video conferencing and never doing physical / in-person exams on them. 3. Convicted of resistance to a court order 	MICHAEL	A29412	MENDOCINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CAPLAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>CABLE</p> <ol style="list-style-type: none"> 1. Conviction of six felony violations of illegal prescribing 2. Addicted to narcotics 3. Fraudulently obtaining controlled substances then performing surgery while under 	BRIAN	G80508	MENDOCINO	EFFECTIVE 08/19/16 CASE NO. 12-2013-234005 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CABLE IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE.

<p>the influence of controlled substances - norco and Percocet.</p> <ol style="list-style-type: none"> 4. Performed surgery on the wrong finger of a patient. 5. Another botched knee surgery on a patient. 				<p>EFFECTIVE 12/16/16 NEW DECISION PLACES DR. CABLE ON FIVE YEARS PROBATION, WHICH SHALL BE CONCURRENT TO THE PROBATION REMAINING ON THE CURRENT DECISION AND ORDER. DURING PROBATION, DR. CABLE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT DURING SURGICAL PROCEDURES IN THE OPERATING ROOM.</p>	
<p>CORTINA</p> <ol style="list-style-type: none"> 1. Performed incorrect tubal ligation surgery – only did right fallopian tube, not left. Woman got pregnant again as a result. 2. Multiple botched surgeries on another patient trying to remove ovarian remnant – another doctor had to do the surgery to solve the problem. 3. Convicted of filing false tax return – not listing hundreds of thousands of gross business receipts 4. Failure to conduct thorough evaluations of patients complaints of pelvic pain, offer alternative for treatment, and provide receipt of informed consent for 	<p>PABLO</p>	<p>47561</p>	<p>MENDOCINO</p>	<p>EFFECTIVE 06/09/10 SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 06/18/15 NEW DECISION ADDS TWO YEARS PROBATION, CONSECUTIVE TO THE CURRENT SEVEN YEAR PROBATION TERM. ALL ORIGINAL TERMS AND CONDITIONS REMAIN IN FULL FORCE AND EFFECT. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT PERFORM ANY SURGICAL PROCEDURE INVOLVING ADMINISTRATION OF ANESTHESIA AND SHALL NOT UTILIZE NON-ANESTHESIA PERSONNEL IN THE ADMINISTRATION OF ANESTHETICS FOR INDUCING SEDATION IN A NON-ACCREDITED SURGICAL SETTING.</p>	<p>6/18/2015</p>

<p>surgery, poorly managed surgical treatment.</p> <p>5. Operated an unaccredited surgical facility in violation of the law.</p> <p>6. Sued for malpractice 15 times.</p>					
<p>TERAN</p> <p>1. Abused methylphenidate – exhausted his wife’s prescription then prescribed it to his girlfriend so he could continue abusing the drug.</p> <p>2. Consensual sex with patient</p> <p>3. Created false and misleading medical records</p>	GUY	53014	MENDOCINO	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TERAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	12/27/2013

<p>DE ZUBIRIA</p> <p>1. Sex with patient - consensual</p>	RODRIGO	70728	MERCED	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 09/23/12 UNTIL 11/21/12. RESTRICTIONS; PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND MUST HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING, OR TREATING FEMALE PATIENTS.</p>	9/7/2012
<p>WHITE</p> <p>1. Inappropriate and excessive prescribing – not doing proper exams prior to prescribing</p>	SUZANNE	64192	MERCED	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES AS DEFINED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR MEDICAL</p>	4/19/2013

				PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	
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WILLIAMS See below	DANIEL	37614	MODOC	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WILLIAMS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/22/2011
WILLIAMS 1. Saw hundreds of patients out of his home and used old prescription pads from his former employers: clinics / hospitals 2. Excessive and inappropriate prescribing – Vicodin / norco 3. Convicted of misdemeanor – used his girlfriend to get Vicodin prescription for himself. 4. Negligent care of multiple patients – complaints brought by other doctor and patient’s husband – excessive prescribing with no treatment plan	DANIEL	37614	MODOC	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM PRACTICING PAIN MANAGEMENT AND/OR TREATING PATIENTS WITH CHRONIC PAIN, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS AND NURSE PRACTITIONERS.	11/20/2015

<p>ANNIS</p> <ol style="list-style-type: none"> 1. Board in Illinois denied licensure due to improper billing 2. Pending criminal charges in Illinois related to false claims and billings 	<p>JONATHAN</p>	<p>51075</p>	<p>MONTEREY</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>3/3/2016</p>
<p>HULSTEDT</p> <ol style="list-style-type: none"> 1. Aiding and abetting unlicensed workers to practice medicine and administer care – doctor’s wife was office manager and administered breathing treatment medication to a child – child became upset and mom discontinued treatment and took child out of the office and filed complaint with medical board. 	<p>DOUGLAS</p>	<p>42397</p>	<p>MONTEREY</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HULSTEDT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>4/28/2016</p>
<p>MANGAR</p> <ol style="list-style-type: none"> 1. Excessive and inappropriate prescribing to a patient with addictive behavior and alcohol abuse. 2. Inadequate treatment plan – medications prescribed without a plan 3. Mismanagement of medications – patient was given more than maximum dosage of Ritalin 4. Failed to obtain a complete history 5. Failed to perform an examination before administering certain drugs 6. Incomplete records – failed to document 	<p>STEVEN</p>	<p>65476</p>	<p>MONTEREY</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MANGAR IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>10/5/2012</p>

patient's opioid therapy					
MCQUADE 1. Medical condition impairs safe practice of medicine unless medical condition is monitored by a physician	MARY	59938	MONTEREY	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	8/28/2014

ARMSTRONG 1. Negligence while performing proper cervical cancer check	JOHN	37899	NAPA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ARMSTRONG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/6/2014
HENDRICKS 1. Driving under the influence of alcohol 2. Failed drug test during probation – tested positive for alcohol	JAMES	84825	NAPA	EFFECTIVE 12/05/13 FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HENDRICKS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 09/14/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE.	12/5/2013
VAZIRI 1. Subscribing false tax returns (felony)	ALI	71962	NAPA	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIX MONTHS ACTUAL SUSPENSION. SUSPENSION SERVED. DURING PROBATION, DR. VAZIRI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/29/2015
WENNEKER 1. Negligent care and diagnosis of a patients colonic polyp	WENDEL L	37197	NAPA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WENNEKER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/10/2014
HENDRICKS	JAMES	G84825	NAPA	EFFECTIVE 12/05/13 FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HENDRICKS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE	

<p>BEBAWI</p> <ol style="list-style-type: none"> 1. Mental illness 2. Substandard care of three podiatric patients 	<p>NAGUIB</p>	<p>46388</p>	<p>ORANGE</p>	<p>EFFECTIVE 07/22/11 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 10/24/13 NEW DECISION CONTINUES PROBATION WITH ADDITIONAL TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, SHALL NOT PROVIDE MEDICAL EVALUATION CARE OR PROVIDE TREATMENT TO ANY PATIENT UNDER 16 YEARS OF AGE UNTIL PASSING PACE AND FROM ENGAGING IN ANY MEDICAL ACTIVITIES THAT REQUIRE SIGNIFICANT VISUOSPATIAL SCALE INCLUDING BUT NOT LIMITED TO RADIOLOGY AND SURGICAL PROCEDURES.</p>	<p>10/24/2013</p>
<p>BENJAMIN</p> <ol style="list-style-type: none"> 1. Convicted in Riverside County of stealing from Nordstrom and Target 2. Lied to medical board about convictions 3. Excessive narcotic / opiate and controlled substance prescriptions to a patient enabling addiction 	<p>ZAN</p>	<p>54540</p>	<p>ORANGE</p>	<p>EFFECTIVE 02/06/15 CANNOT PRACTICE MEDICINE UNTIL HE SURRENDERS HIS DEA PERMIT; SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: FOR FIVE YEARS FROM THE EFFECTIVE DATE, DR. BENJAMIN SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND FOR THE ENTIRE PROBATIONARY TERM IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>2/6/2015</p>

BLAU	ROBERT	24088	ORANGE	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BLAU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/25/2016
<ol style="list-style-type: none"> 1. Inappropriately prescribing norco / controlled substances to an employee and his pool cleaner without any records or medical exams 					
BOHM	JOHN	51741	ORANGE	EFFECTIVE 04/24/08 LICENSE REVOKED. EFFECTIVE 02/14/14 LICENSE REINSTATED; CANNOT PRACTICE MEDICINE PENDING SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS AND SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.	2/14/2014
<ol style="list-style-type: none"> 1. Sexual misconduct with multiple patients 2. Had sex with patient Barbara A. She filed complaint with LAPD. He was convicted of sexual exploitation of patient. 3. Tried to stick penis in another patient Anna B's mouth and hand – judge and medical board reviewers discredited patient's claim. 4. Attempted to have sex with patient Lorraine G – also touched her breasts and kissed her during multiple visits. 					
CALHOUN	KEVIN	83498	ORANGE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING ANY AND ALL COSMETIC AND AESTHETIC SURGICAL PROCEDURES OF ANY KIND ON ANY PATIENT AT ANY LOCATION, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	7/10/2015
<ol style="list-style-type: none"> 1. Negligent care of multiple liposuction patients – botched procedures. 2. Closed offices and moved without telling previous patients and finishing 					

3. treatments.					
CHIN 1. Inappropriate and excessive Vicodin and Xanax prescriptions to two undercover medical board investigators posing as fake patients addicted to prescription drugs and wanting more	RUBEN	53452	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/3/2013
CHU 1. Negligent care of patient for about a year resulting in patient dying	EDMON D	34289	ORANGE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CHU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/5/2013
CORONA 1. Sheriff's called to his house because of complaints of breakdown – had to taser him and take to hospital – diagnosed with bipolar or unipolar. 2. Was self administering dangerous drug prescribed by psychiatrist	PAUL	69171	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CORONA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/31/2015
DANG 1. Convicted of evading federal currency reporting requirements by utilizing over \$400k in money order amounts	SURINDER	24948	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 02/12/16 UNTIL 03/12/16. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY	4/25/2014

<p>under \$3k.</p> <p>2. DEA revoked prescription authorization because 5 million doses of hydrocodone were unaccounted for</p>				<p>CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	
<p>DANG</p> <p>1. DEA revoked prescription authorization because 5 million doses of hydrocodone were unaccounted for</p>	SATINDE R	31227	ORANGE	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	8/28/2015
<p>DE JESUS</p> <p>1. Deemed unfit to practice medicine because of bipolar disorder with paranoid personality traits, etc.</p>	VIOLETA	48057	ORANGE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	10/9/2014
<p>DELL</p> <p>1. Had affairs with two patients while he was married</p> <p>2. Wrote several prescriptions for many dangerous drugs to one of the patients without proper exam</p>	JEFFREY	39875	ORANGE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: MUST HAVE THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING, OR TREATING FEMALE PATIENTS; PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS EXCEPT WHEN WORKING IN A HOSPITAL SETTING IN THE EMERGENCY ROOM.</p>	1/26/2012

<p>DESANTO</p> <p>1. Secretly switched / stole two patients Percocet and Endocet prescriptions with acetaminophen because he was addicted to the drugs.</p>	JOSEPH	81151	ORANGE	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 07/26/15 THROUGH 09/24/15.</p> <p>RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT FOR SUBOXONE AND VALIUM, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	7/10/2015
<p>EDWARDS</p> <p>1. Was calling pharmacies and obtaining weekly shipments of valium and norco for patients but using them for himself.</p>	MICHAEL	91508	ORANGE	<p>EFFECTIVE 01/19/10, CASE NO. 08-2008-189244 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 11/26/14 CASE NO. 08-2011-215524 EIGHTEEN MONTHS PROBATION SHALL BE SERVED CONSECUTIVELY TO THE CURRENT PROBATION TERM. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	11/26/2014
<p>FOULADI</p> <p>1. Negligent care of patient during intestine surgery resulting in death.</p> <p>2. Hernia repair on wrong side of patient</p>	ALI	38712	ORANGE	<p>FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FOULADI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	5/1/2015
<p>FRIEDBERG</p> <p>1. Was providing anesthesia to a 57 year old woman during dental implant surgery – heart stopped / stopped breathing – tried to resuscitate</p>	BARRY	29706	ORANGE	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FRIEDBERG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	2/19/2015

<p>unsuccessfully – 911 call – paramedics came – ended up brain dead at hospital. Interfered with paramedics and provided differing records to paramedics than those contained at dental facility.</p>					
<p>FU</p> <ol style="list-style-type: none"> 1. Convicted of health care fraud 2. Scheme involved doctors paying kickbacks to marketers to get elderly patients from senior homes for respiratory treatments – some of the treatments were unsupervised and some never took place. 	<p>XINMIN G</p>	<p>70082</p>	<p>ORANGE</p>	<p>SEVEN YEARS PROBATION WITH ACTUAL SUSPENSION. SUSPENSION SERVED 08/23/13 UNTIL 01/21/14. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>8/23/2013</p>
<p>GARCIA</p> <ol style="list-style-type: none"> 1. Did cesarean surgery to delivery healthy baby then left hospital and never came back even though nurse called him several times and had to issue a code blue because the mother's health was deteriorating. Other doctors had to step in and the mother eventually died. 2. Switched hospitals and lied to the new employer saying 	<p>JERRY</p>	<p>86442</p>	<p>ORANGE</p>	<p>CASE NO. 11-2007-181346 EFFECTIVE 01/03/11 SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 11/01/13 NEW DECISION CASE NO. 19-2011-213851 EXTENDS PROBATION ONE YEAR. RESTRICTIONS: PROHIBITED FROM PRACTICING UNLESS HE HAS A SPECIFIC PHYSICIAN TO ATTEND TO HIS PATIENTS SHOULD HE BECOME UNAVAILABLE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>11/1/2013</p>

his license had never been suspended and said the medical board cleared him of all charges even though they were still investigating.					
<p>IYENGAR</p> <ol style="list-style-type: none"> 1. Sexually assaulted two nurses at Anaheim General Hospital – got 90 day suspension from hospital (1990s). 2. Tried switching to Mission Hospital and lied when they asked if he had ever been suspended at another hospital. 3. In the 2000s at Fountain Valley made sexually inappropriate comments to and tried kissing at least three female staff. 	SRIDHARA	42391	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 12/2/12 THROUGH 12/31/12. DURING PROBATION, DR IYENGAR IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/16/2012
<p>JUSTICE</p> <ol style="list-style-type: none"> 1. Convicted of health care fraud totaling around \$1 million – fraudulent billing for cancer meds that were never provided or billing for more expensive treatments when less expensive ones were used. 	GLEN	23862	ORANGE	TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	3/16/2012
<p>KELLY</p> <ol style="list-style-type: none"> 1. DUI 	ELEANOR	64544	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	10/21/2015

<p>KNIGHT</p> <ol style="list-style-type: none"> Had sex with female plastic surgeon patient while husband and kids were waiting in car in parking lot. Repeatedly tried to kiss another female plastic surgery patient until she walked out. 	MARK	78828	ORANGE	<p>EFFECTIVE 12/15/10 LICENSE SURRENDERED; EFFECTIVE 03/06/15 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING ALL PATIENTS, PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE.</p>	3/6/2015
<p>KRAUS</p> <ol style="list-style-type: none"> ? 	LEON	28446	ORANGE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. LICENSE MUST BE PLACED ON INACTIVE STATUS THROUGHOUT HIS PROBATIONARY TERM.</p>	10/12/1994
<p>LAM</p> <ol style="list-style-type: none"> Kaiser doctor - Went through medical records of 172 other Kaiser employees and their family members Psychiatric evaluation showed that he had a mental illness that impacted his ability to practice medicine 	TAT	62418	ORANGE	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LAM IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE.</p>	3/25/2016
<p>LYNCH</p> <ol style="list-style-type: none"> Excessive controlled substance prescriptions to patient 	TIMOTHY	74208	ORANGE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LYNCH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	10/3/2014
<p>LYNN</p> <ol style="list-style-type: none"> Excessive and inappropriate pain prescriptions to patients showing addictive behavior 	PHILIP ANTHONY	66511	ORANGE	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRACTICING PAIN MANAGEMENT AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	6/12/2014

<p>MACARTHUR</p> <ol style="list-style-type: none"> 1. Performed surgery on wrong knee in one patient. 2. Accidentally dropped hot medical device against another patient's leg causing first-third degree burns 3. In another patient, made numerous mistakes in knee surgery – patient ended up going to another doctor who had to re-do the knee surgery to remove the displaced screw and correct other mistakes that were made. 	ROBERT	76912	ORANGE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MACARTHUR IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/9/2013
<p>MARCUS</p> <ol style="list-style-type: none"> 1. Convicted of using cocaine in car in his medical office parking lot with woman 	ALAN	39696	ORANGE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	2/28/2014
<p>MELAHOURES</p> <ol style="list-style-type: none"> 1. Negligent care of patient during cyst removal procedures 	KONSTANTINOS	40532	ORANGE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MELAHOURES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/1/2013
<p>MOLNAR</p> <ol style="list-style-type: none"> 1. Was supposed to remove breast implants and told patient he removed them even though he left a partially ruptured breast implant in the patient. 2. Billing for services not preformed. 	EUGEN	24674	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	12/29/1989

<p>3. Performed forehead lift on a patient that only wanted eyelid surgery.</p> <p>4. Billing for procedures not covered by insurance</p>					
<p>PAGE</p> <p>1. Negligence regarding prescriptions to patients while practicing in Utah and also working for an online pharmacy company</p> <p>2. Performed lipo and breast augmentation surgeries in Arizona that were not authorized</p>	GARY	67353	ORANGE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PAGE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/26/2014
<p>PAK</p> <p>1. Failed to identify hip fracture – negligence in care of senior patient who ended up dying.</p>	SU-YONG	34079	ORANGE	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PAK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/20/2016
<p>PARK</p> <p>1. Neurologist who failed to look at the MRI / CT scan from the primary care physician and failed to look at the info from an ER visit that showed the patient had a tumor that needed to be removed. Patient ended up getting the tumor taken out at a subsequent ER visit.</p>	SUNG	48704	ORANGE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PARK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/30/2016

<p>PATEL</p> <ol style="list-style-type: none"> 1. Perforated a patient's esophagus during a procedure and failed to take corrective action – patient ended up in the ER and had to undergo a couple of surgeries and had to be hospitalized for three weeks. 	<p>BAKULK UMAR</p>	<p>45267</p>	<p>ORANGE</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTION: SHALL NOT PERFORM ANY GASTROENTEROLOGICAL PROCEDURE UNTIL COMPLETION OF PHYSICIAN ASSESSMENT AND CLINICAL EDUCATION PROGRAM (PACE); IN ADDITION ONCE COMPLETION OF PACE DR. PATEL MAY NOT PERFORM ANY GASTROENTEROLOGICAL PROCEDURE IN HIS MEDICAL OFFICE.</p>	<p>11/18/2011</p>
<p>PETRAGLIA</p> <ol style="list-style-type: none"> 1. Excessive and inappropriate prescriptions to multiple patients including one who died from acute methadone intoxication and another who died from acute poly drug intoxication due to combined effects of morphine, codeine, diazepam, hydrocodone, oxycodone, and alprazolam. 	<p>JOHN</p>	<p>68169</p>	<p>ORANGE</p>	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II OR III CONTROLLED SUBSTANCES, EXCEPT IN A PERIOPERATIVE SETTING AND WHEN USED AT THE LOCATION OF THE PROCEDURE AND NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES.</p>	<p>9/20/2013</p>
<p>RALLS</p> <ol style="list-style-type: none"> 1. Suffers from a mental disorder that can impact her ability to practice medicine. 	<p>JULIE</p>	<p>63700</p>	<p>ORANGE</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RALLS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>3/7/2014</p>
<p>REULAND</p> <ol style="list-style-type: none"> 1. Sexual relationship with patient - consensual 2. Negligent in his care of an elderly patient at a nursing home who ended up 	<p>RALF</p>	<p>72259</p>	<p>ORANGE</p>	<p>EFFECTIVE 08/13/09 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 04/26/12 NEW DECISION SUPERSEDES THE BOARD'S EARLIER DECISION IN CASE NUMBER 09-2008-190188 DR. REULAND IS PLACED ON FOUR YEARS PROBATION WITH VARIOUS TERMS AND</p>	<p>4/26/2012</p>

dying from ulcers that doctor was not appropriately treating.				CONDITIONS. DURING PROBATION DR. REULAND IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
<p>ROSENFELD</p> <ol style="list-style-type: none"> 1. Excessive and inappropriate prescribing 2. Negligent care of multiple patients including one who died with the following post-mortem drugs found in his system: fentanyl, morphine, oxazepam, temazepam, diazepam, alprazolam, THC. 3. Inadequate evaluations of patients and reevaluations to determine if continued controlled substance prescriptions were warranted 	IRWIN	34731	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ROSENFELD IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	12/23/2011
<p>SCHALLER</p> <ol style="list-style-type: none"> 1. Convicted of drugged driving: hydroxyalprazolam, alprazolam (Xanax) and unlawful possession of a controlled substance (subutex) prescribed to another individual. 2. Convicted again of drugged driving: hydromorphone 3. Negligent care of two patients – 	DOUGLAS	61159	ORANGE	<p>CASE NO. 04-2011213435, EFFECTIVE 09/09/12 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 09/24/12 THROUGH 11/22/12. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p> <p>EFFECTIVE 07/20/16 NEW DECISION ADDS TWO YEARS PROBATION TERM TO</p>	9/10/2015

inappropriate prescribing				COMMENCE UPON THE EXPIRATION OF THE PRIOR PROBATION TERM WITH VARIOUS TERMS AND CONDITIONS.	
SCHREIBER 1. Sexual relationship with patient – consensual 2. Allowed unsupervised medical assistance to administer injections to multiple patients	JANET	47346	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SCHREIBER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/1/2011
SCHWIED 1. Made sexual advances toward patient – asked patient to perform oral sex on him. 2. Repeatedly and excessively prescribed controlled substances to patient without prior exam and when she was not under his care	ELLIS	39245	ORANGE	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FIFTEEN DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/06/14 THROUGH 10/21/14. RESTRICTIONS: PROHIBITED FROM ACCEPTING, CONSULTING, TREATING, EXAMINING OR RENDERING ANY PSYCHIATRIC CARE, PSYCHOTHERAPY OR TREATMENT TO ANY NEW FEMALE WHO IS EIGHTEEN YEARS OF AGE OR OLDER, AND TO ANY NEW COUPLES INVOLVING A FEMALE OVER THE AGE OF EIGHTEEN, WHO ARE NOT PRESENTLY UNDER DR. SCHWIED'S CARE AND TREATMENT AND SUPERVISING PHYSICIAN ASSISTANTS.	9/19/2014
SIEGEL 1. Anesthesiologist – used controlled substances while on duty at the hospital 2. Repeat offender with med board probations dating back to 1990 3. Participated in scheme with two other doctors where they would	HOWARD	57480	ORANGE	EFFECTIVE 11/16/06 LICENSE REVOKED; EFFECTIVE 05/20/11 LICENSE REINSTATED AND PLACED ON TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: DURING PROBATION, DR. SIEGEL IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	5/20/2011

create fake medical records and fake billing to make more money performing cosmetic surgeries on patients.					
<p>SWAN</p> <ol style="list-style-type: none"> 1. Was convicted of writing prescriptions to former and current girlfriends and using the drugs for himself: Adderall, ambien, clonazepam, vyvanse, dextroamphetamine, methylin. 2. Not complying with Med Board drug testing. 	BRIAN	88378	ORANGE	EFFECTIVE 06/12/14 CASE NO. 04-2012-220756; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 11/30/16 NEW DECISION EXTENDS PROBATION TWO YEARS WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	6/12/2014
<p>SYED</p> <ol style="list-style-type: none"> 1. Sexual misconduct with 19 year old mental health patient – he gave her money and asked if he could come to her house – he met her at mall and bought her jeans and tried kissing her. 2. Patient told her mother and mother complained to clinic director. 	HOZAIR	111058	ORANGE	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 04/06/14 UNTIL 05/06/14. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS, AND FROM SEEING, CONSULTING WITH, ATTENDING, PRACTICING MEDICINE ON, OR TREATING ANY AND ALL FEMALE PATIENTS.	3/21/2014
<p>TUCKER</p> <ol style="list-style-type: none"> 1. Tested positive for and had addiction to cocaine & alcohol 	JAMES	35623	ORANGE	EFFECTIVE 09/18/00 LICENSE SURRENDERED; EFFECTIVE 10/31/14 LICENSE REINSTATED; CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. FIVE YEARS PROBATION WITH VARIOUS	10/31/2014

				TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRACTICING AS AN ANESTHESIOLOGIST, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	
VIERREGGER 1. Convicted three times of DUI – alcohol addiction.	KRISTEN	112427	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VIERREGGER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/9/2012
VU 1. Bought expired back surgery medical devices from a terminated employee of Boston Scientific at a reduced price and installed them with people who were not properly licensed. 2. Huntington Beach Police came to recover medical devices and supplies worth over \$140k. 3. Excessive and inappropriate prescribing - One of his patients died of drug overdose: hydrocodone, fentanyl, carisoprodol, chlordiazepoxide, demoxepam, quetiapine metabolite. 4. Another patient died of acute polypharmacy intoxication – methadone, diazepam, fentanyl.	VAN	71968	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/12/2015

<p>WADE</p> <p>1. While in Tennessee worked for internet pharmacy and was convicted of unlawfully dispensing and possessing controlled substances.</p>	MARK	47936	ORANGE	EFFECTIVE 02/04/08 SURRENDER OF LICENSE; EFFECTIVE 11/15/13 LICENSE REINSTATED; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WADE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/15/2013
<p>WEINSTEIN</p> <p>1. Engaged in scheme where he excessively billed Travelers Insurance for services not performed.</p>	JACK	21109	ORANGE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	4/4/1996
<p>WOODWARD</p> <p>1. Convicted of unlicensed practice of medicine – sting operation of We Laser lead to arrests for unlawfully performing botox, laser hair removal, and other procedures.</p>	ARTIS	40488	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. WOODWARD IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE.	9/12/2014
<p>WU</p> <p>1. Put on probation in New York for billing and record keeping issues.</p>	BENSON	82299	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 08/09/15 UNTIL 09/07/15. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	7/24/2015
<p>PATEL</p> <p>1. Unprofessional / Sexual misconduct with a minor female patient and coworker.</p> <p>2. Allowed unlicensed individuals to</p>	HITESH	A50292	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PATEL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	

issue prescriptions at his clinic.				
<p>MANTELL</p> <p>1. Excessive and inappropriate prescribing.</p>	RICHARD	A39992	ORANGE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FIFTEEN (15) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 07/30/16 UNTIL 08/13/16.</p> <p>RESTRICTIONS: ONLY AUTHORIZED TO ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS CONTROLLED SUBSTANCES LISTED IN SCHEDULES III, IV AND V AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND/OR NURSE PRACTITIONERS.</p>
<p>HOCKENBURY</p> <p>1. Negligent care of patient</p>	STEPHEN	A65864	ORANGE	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HOCKENBURY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>
<p>EWING</p> <p>1. Multiple negligent lipo surgeries on a patient</p> <p>2. Botched breast implant surgery resulting in patient eventually have to go to ER due to infection and nipple falling off.</p> <p>3. Another botched breast implant surgery resulted in another patient having to be hospitalized for severe sepsis.</p> <p>4. Alcohol abuse and addicted to opiates – Norco.</p> <p>5. Convicted of assaulting police officer and public intoxication.</p> <p>6. DUI</p>	SCOTT	A83530	ORANGE	<p>EFFECTIVE 12/16/16 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION AND A CLINICAL TRAINING OR EDUCATION PROGRAM. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.</p> <p>RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND PERFORMING COSMETIC SURGERY.</p>
<p>HARMS</p> <p>1. Multiple DUIs</p>	MONICA	A94064	ORANGE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HARMS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>

<p>SOSIN</p> <ol style="list-style-type: none"> 1. Excessive and inappropriate prescribing 2. Negligent care of another patient. 	<p>DAVID</p>	<p>G13099</p>	<p>ORANGE</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>
<p>NAPLES</p> <ol style="list-style-type: none"> 1. Negligent care of patient – excessive and inappropriate prescribing - ended up dying from methadone intoxication. 	<p>ANTHONY</p>	<p>G36930</p>	<p>ORANGE</p>	<p>THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. NAPLES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>
<p>LEHMAN</p> <ol style="list-style-type: none"> 1. Undercover med board investigators posed as patients – dr was not performing proper exams and giving patients weight loss pills by unlicensed personnel. Created false medical records. Excessive prescribing and dispensing misbranded drugs. 2. Excessive and inappropriate prescribing to multiple patients including at least three female patients who died from overdoses: ex – one from polydrug intoxication: methadone, morphine, codeine, carisoprodol, meprobamate, 	<p>KENT</p>	<p>G38595</p>	<p>ORANGE</p>	<p>EIGHT YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULE III DRUGS OF PHENDIMETRIZINE AND TESTOSTERONE, SCHEDULE IV DRUGS OF PHENTERMINE AND NUVIGIL/PROVIGIL AND SCHEDULE V DRUGS.</p>

sertraline, alprazolam. Another from acute morphine intoxication.					
RUCKER 1. DUI	RICHARD	G61070	ORANGE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RUCKER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
VAN 1. Was arrested in Mississippi for excessive prescribing at her husbands family practice.	THU-HOA	G81299	ORANGE	EFFECTIVE 09/23/16 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	
DORIN 1. Sent false and fraudulent email from his employer's (hospitals) email service to the employer of a guy falsely alleging that the guy had a criminal record in order for the guy's exwife to gain leverage in divorce proceedings since the dr and soon to be exwife were dating.	ADAM	G86440	ORANGE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DORIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
SCHALLER 1. Multiple Instances of Use of Controlled Substances or Dangerous Drugs 2. Unprofessional Conduct	DOUGLAS	61159	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 09/24/12 THROUGH 11/22/12. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. A NEW DECISION IN	7/20/16

				2016 ADDS TWO YEARS PROBATION TERM TO COMMENCE UPON THE EXPIRATION OF THE PRIOR PROBATION TERM WITH VARIOUS TERMS AND CONDITIONS.	
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SWAN 1. Illegal Use of Prescription Drugs 2. Drug Conviction	BRIAN	88378	ORANGE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS IN 2014 AND EXTENSION OF PROBATION TWO YEARS WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	11/30/16
BEHNIWAL 1. Convicted of sexual misconduct with a patient.	MANDEEP	79753	PLACER	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: DURING PROBATION, DR. BEHNIWAL IS PROHIBITED FROM TREATING FEMALE PATIENTS AND FROM SUPERVISING PHYSICIAN ASSISTANTS.	12/30/2010
CANDELARIA 1. Self-use of controlled substances in a dangerous manner. 1. Practiced under the influence of drugs.	YESSENNIA	52575	PLACER	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ORDERING, PRESCRIBING, DISPENSING, ADMINISTERING, FURNISHING OR POSSESSING ANY CONTROLLED SUBSTANCES, EXCEPT FOR THOSE DRUGS LISTED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR	4/24/2015

				CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	
HUI 1. Failure to properly treat and access multiple patients, resulting in unnecessarily suffering. 1. Failure to maintain adequate and accurate medical records.	ESTHER	81053	PLACER	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HUI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/8/2014
MAROON 1. Practicing medicine while under the influence. 1. Self-administering dangerous drugs.	TJ	55307	PLACER	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES EXCEPT THOSE LISTED IN SCHEDULE(S) III, IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/27/2013

GRIER 1. Did not properly supervise physicians assistant – let them do most	BARNETT	23617	PLUMAS	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED	11/23/2011
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<p>patient visits and prescriptions</p> <p>2. Provided prescriptions to a gang over a couple of months</p> <p>3. Did not file returns with FTB 2002 – 2004 for over \$5 million in reimbursements – convicted of failure to file tax returns</p>				12/09/11 UNTIL 01/22/12.	
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<p>AKMAKJIAN</p> <p>1. Negligence in care of multiple patients in prescribing narcotics</p> <p>2. Prescribing drugs without necessary examination</p> <p>3. Overprescription of narcotic drugs</p>	JACK	62470	RIVERSIDE	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	10/16/2015
<p>AMIN</p> <p>1. Prescribed medically unnecessary care, surrendered his license to practice medicine in Washington</p>	CHIRAG	72688	RIVERSIDE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. AMIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/28/2013
<p>ASPREC</p> <p>1. Negligent care of patient – misinterpreted test results resulting in patient death</p> <p>2. Failure to maintain adequate records of care</p> <p>3. Failure to comply with initial terms of probation</p>	JOSEPH	41691	RIVERSIDE	EFFECTIVE 08/14/14 CANNOT PRACTICE MEDICINE PENDING SUCCESSFUL COMPLETION OF THE PHYSICIAN ASSESSMENT AND CLINICAL EDUCATION PROGRAM (PACE). THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ASPREC IS PROHIBITED FROM SUPERVISING PHYSICIAN	8/14/2014

				ASSISTANTS.	
BOWEN *probation completed 1. Drug/alcohol abuse, DUI	DAVID	60193	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BOWEN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/9/2014
BUETOW 1. Convicted of fraud – falsely billed for services not provided	NORMAN	40726	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 11/15/14 THROUGH 12/30/14. DURING PROBATION, DR. BUETOW IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/31/2014
CARUSO 1. Drug use, convicted of driving under the influence of controlled substance	VITO	50688	RIVERSIDE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CARUSO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/27/2013
CATLETT 1. Alcohol abuse and conviction of driving under the influence	STEVEN	43342	RIVERSIDE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CATLETT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/26/2015
CHEIN* *completed a prior probationary period	EDMUND	38678	RIVERSIDE	FOUR YEARS PROBATION WITH	11/2/2012

1. Convicted of several misdemeanors including brandishing a firearm and vandalism				VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CHEIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
COX 1. Negligence in care – prescription of narcotics without proper evaluation or follow up 2. Failure to keep proper records 3. Unprofessional conduct in treating a close family member at home and prescribing controlled substances	B	6433	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND PROVIDING DIRECT PATIENT CARE AND TREATMENT. SHALL PRACTICE AS A QUALIFIED MEDICAL EXAMINER ONLY.	6/5/2013
HSIANG 1. Negligence in care – excessive prescription of narcotics to patient with history of opioid addiction, wrote prescriptions for future dates	PAUL	62783	RIVERSIDE	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HSIANG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/2/2015

<p>KULDANEK</p> <ol style="list-style-type: none"> 1. Convicted of felony – conspiracy to manufacture marijuana 	GREGORY	130383	RIVERSIDE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND FOR THE FIRST TWO YEARS OF PROBATION, DR. KULDANEK MUST HAVE A PRACTICE MONITOR.</p>	11/20/2015
<p>LEE</p> <ol style="list-style-type: none"> 1. Performed tests he was not certified for and falsified certifications 2. Filed claims for procedures not performed 	DONALD	56294	RIVERSIDE	<p>SIX YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LEE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	11/2/2012
<p>LIFSCHUTZ</p> <ol style="list-style-type: none"> 1. Negligence in care of many patients, some resulting in patient death 2. Failure to maintain records 	HARRY	42802	RIVERSIDE	<p>THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LIFSCHUTZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	7/11/2014
<p>MANGOBA</p> <ol style="list-style-type: none"> 1. Negligent overprescription of narcotic drugs to patients without proper examination or records 2. False representation on medical documents 	LUTHER	77574	RIVERSIDE	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE,</p>	9/4/2015

				DISPENSE, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT FOR THOSE LISTED IN SCHEDULES IV AND V, THIS PRESCRIBING RESTRICTION SHALL TERMINATE 09/04/18, PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND FROM PROVIDING ANY TREATMENTS OR PRESCRIPTIONS TO ANY PATIENT FOR THE PURPOSE OF TREATING THEIR CHRONIC PAIN.	
MARDONES 1. Alcohol abuse, multiple DUIs, unprofessional conduct	JOHN	41581	RIVERSIDE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MARDONES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/26/2015
MOTT* *license was revoked in 2004, license was reinstated with a probationary period in 2011, license was reinstated in 2016 1. Substance abuse, overdose of prescription drugs and attempted suicide	JOSEPH	78419	RIVERSIDE	EFFECTIVE 04/28/04 LICENSE SURRENDERED; EFFECTIVE 09/16/2011 LICENSE REINSTATED AND PLACED ON FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MOTT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/16/2011
NEVINS 1. Alcohol abuse, DUI conviction and failure to report conviction	JAMES	26710	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. NEVINS IS PROHIBITED FROM SUPERVISING	8/26/2015

				PHYSICIAN ASSISTANTS.	
OWIESY 1. Aiding unlicensed practice of medicine 2. Failure to report felony charge	FAROUGH	87796	RIVERSIDE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. OWIESY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/26/2016
PAUL 1. Conviction of misdemeanor assault	PETER	40030	RIVERSIDE	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 09/02/14 THROUGH 10/02/14. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/3/2014
PEREA 1. Lied and misrepresented self on medical document	JAIME	72724	RIVERSIDE	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	3/9/2016
PONCE 1. Alcohol abuse and multiple misdemeanor DUI convictions	GEORGE	51194	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	2/28/2014
SALIB 1. Negligence in care of patient – failure to properly diagnose and refer to surgeon 2. Presented misleading statements to the medical board	HANI	45331	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/06/13 UNTIL 11/04/13. DURING PROBATION, DR. SALIB IS PROHIBITED	9/20/2013

				FROM SUPERVISING PHYSICIAN ASSISTANTS.	
THIO 1. Negligent care of patients – improper and over injection of steroids in patient and additional treatment without proper examination 2. Failure to maintain proper records	ANDREW	75296	RIVERSIDE	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	1/13/2016
TRUONG 1. Negligence in care – repeated and over prescription of opioids without proper evaluation	HUY	80704	RIVERSIDE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TRUONG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/3/2016
ZHAO 1. Negligence – employing physician assistants to perform patient exams improperly (no delegation of service) 2. Prescribing medical marijuana through assistants without examination 3. Falsifying medical documents 4. Aiding the unlicensed practice of medicine 5. Practicing medicine under a name without fictitious name permit 6. Failure to supervise physician assistants	XUEREN	105851	RIVERSIDE	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE.	9/26/2014
FOSTER 1. Prescribing without exam 2. Repeated acts of neglect with several patients	MARK	A61041	RIVERSIDE	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE DRUGS LISTED IN	

				SCHEDULES III, IV, AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
DINH 1. Gross negligence with a patient's laparoscopic cholecystectomy.	TOMMY	A62294	RIVERSIDE	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.
L'ARCHEVEQUE 1. Negligence with a patient's weight loss program which resulted in inadequate records and health complications.	DEE	G78038	RIVERSIDE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRACTICING, PERFORMING AND OR TREATING PATIENTS IN THE AREA OF MEDICAL WEIGHT LOSS AND SUPERVISING PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES OUTSIDE OF AN EMERGENCY ROOM OR URGENT CARE SETTING.
SIMENTAL 1. Negligent with several patients dealing with drug addiction. Failure to adequately assess and diagnose patients. 2. Prescribed medication without prior examination 3. Excessive prescribing that resulted in health complications.	MICHAEL	A86750	RIVERSIDE	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.
FAKHOURY 1. Sexual abuse and misconduct with multiple patients. 2. Improper examination of multiple patients.	RAMON	A98772	RIVERSIDE	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FAKHOURY SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.
CHILDERS 1. Performed surgery on wrong finger of a patient.	BEN	G76953	RIVERSIDE	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING

2. Repeated acts of neglect. 3. Altered and falsified medical records.				PROBATION, DR. CHILDERS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
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ALLEN 1. Providing inappropriate medical marijuana prescriptions to patients (undercover agents)	DAVID	53466	SACRAMENTO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 06/16/14 UNTIL 09/14/14. RESTRICTIONS: PROHIBITED FROM PROVIDING A MARIJUANA RECOMMENDATION, APPROVAL, OR ANY OTHER WRITTEN SCRIPT TO ANY PATIENT WITHOUT FIRST CONSULTING THE PATIENT'S PRIMARY CARE PHYSICIAN OR PSYCHIATRIST, SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE	5/30/2014
DOWLING 1. Repeat DUI offender 2. Alcohol and drug abuse	MARK	80355	SACRAMENTO	EFFECTIVE 05/08/15 CANNOT PRACTICE MEDICINE UNTIL A PRACTICE MONITOR IS APPROVED BY THE BOARD; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND CONTINUE COMPLIANCE WITH INTERM SUSPENSION ORDER ISSUED ON 10/10/14.	5/8/2015
GOODWIN 1. Negligent care in delivery of baby 2. Failure to follow up with patients and provide them with their medical records 3. Negligent care of patients	GLENDA	71660	SACRAMENTO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GOODWIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/10/2015

<p>HASSAN</p> <ol style="list-style-type: none"> 1. Negligent care of multiple patients 2. Allegedly on controlled substances while seeing patients 3. Letting patients live at his home or office 	<p>ALLEN</p>	<p>29816</p>	<p>SACRAMENTO</p>	<p>EFFECTIVE 02/13/15 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES III THROUGH V UNTIL AND UNLESS HE PASSES A CLINICAL TRAINING PROGRAM, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 01/07/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE BEGINS 01/10/16.</p>	<p>1/7/2016</p>
<p>HENDERSON</p> <ol style="list-style-type: none"> 1. DUI conviction – hit another car at a stop light and drove away. 	<p>DENISE</p>	<p>67876</p>	<p>SACRAMENTO</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HENDERSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>10/8/2014</p>
<p>HOPPER</p> <ol style="list-style-type: none"> 1. Negligent care of two patients – did not properly handle their controlled substance issues 	<p>JENNIFER</p>	<p>72295</p>	<p>SACRAMENTO</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULE II, NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A PATIENT'S CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND</p>	<p>7/3/2014</p>

				SUPERVISING PHYSICIAN ASSISTANTS.	
HUGHES 1. DUI conviction 2. Alcohol and cocaine abuse	DEREK	61410	SACRAMENTO	EFFECTIVE 03/24/09 LICENSE SURRENDERED; EFFECTIVE 04/26/13 LICENSE REINSTATED. TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	4/26/2013
KHAMISHON 1. Repeat DUI offender	ILYA	54344	SACRAMENTO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	9/10/2015
LANE 1. Multiple arrests and encounters with police relating to alcohol and drug abuse and domestic issues and child endangerment	INGVILD	53026	SACRAMENTO	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND ACCEPTING EMPLOYMENT THAT WILL INTERFERE WITH HER NATURAL SLEEP PATTERN.	7/25/2014
NARAYAN 1. Negligent care of several psychiatric patients	PRATAP	52001	SACRAMENTO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE, UNLESS AND UNTIL A PRACTICE MONITOR IS APPROVED.	9/19/2014
RANDHAWA 1. Forged license expiration date when sending to hospital for employment	RAJINDER	50081	SACRAMENTO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RANDHAWA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/22/2015

SANDHU 1. Negligent care of patients – excessive opioid prescribing	NARINDER	56411	SACRAMENTO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DR. SANDHU CAN NOT PRESCRIBE OR RECOMMEND SCHEDULE I, II, AND III DRUGS AS PROVIDED IN THE CALIFORNIA UNIFORM CONTROLLED SUBSTANCES ACT, UNTIL SUCCESSFUL COMPLETION OF THE PRESCRIBING PRACTICES COURSE.	9/19/2014
WATERBURY 1. Drunk while on duty in the ER – endangering patients	JUDE	90991	SACRAMENTO	EFFECTIVE 11/01/12 CASE NO. 02-2012-221153 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 12/24/15 CASE NO. 02-2012-222520 ADDS AN ADDITIONAL THREE YEAR PROBATION BEYOND THE FIVE YEAR PROBATIONARY TERM CURRENTLY SERVING. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	12/24/2015
MEHTANI 1. Negligent care of multiple patients – prescribing without exams	JANAK	A32632	SACRAMENTO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MEHTANI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
MEHRA 1. Fired from Healthknow (telemedicine service provider) because of alcohol problem – drinking vodka at work and being intoxicated.	NEAL	A95686	SACRAMENTO	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MEHRA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
RAM 1. Diverted prescriptions medication from patients for his personal use from UC Davis Health System – opiates –	SURAJ	A124447	SACRAMENTO	EFFECTIVE 07/12/16 FULL INTERIM SUSPENSION ORDER ISSUED-NO PRACTICE. EFFECTIVE 12/07/16 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION AND MUST SURRENDER DEA PERMIT. SIX YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT	

hydromorphone, fentanyl, propofol. 2. Convicted of possession of controlled substance and embezzlement for taking meds from UCDHS and using for personal use.				ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.
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ALAVEKIOS 1. DUI 2. Lied about community service when trying to get his probation terminated early	DAMON	115287	SAN BENITO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ALAVEKIOS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/31/2014
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AZZAWI 1. Sexual abuse with patient; negligence with multiple patients and alteration of medical records	ZAHER	48743	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/5/2014
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CHANG 1. Negligence/incompetence in evaluation and treatment of patient, failing to properly diagnose	RICHARD	86339	SAN BERNARDINO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CHANG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/6/2014
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<p>DE GUZMAN</p> <p>1. Gross negligence in prescription and tracking treatment of patient that died of overdose</p>	MAGNOLIA	98689	SAN BERNARDINO	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND FOR THE FIRST THREE YEARS OF PROBATION, DR. DE GUZMAN IS PROHIBITED FROM PROVIDING ANY TREATMENTS OR PRESCRIPTIONS TO ANY PATIENT FOR THE PURPOSE OF TREATING HIS OR HER CHRONIC PAIN.</p>	9/16/2015
<p>GHATNEKAR</p> <p>1. Gross negligence in performing surgery on multiple patients, failing to adequately perform surgeries</p>	JAI	42883	SAN BERNARDINO	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, PERFORMING SPECIFIC PROCEDURES (SEE DECISION FOR DETAILS) ON ANY PATIENT AND PROVIDING EMERGENCY ROOM ON CALL COVERAGE.</p>	6/10/2015
<p>GILL</p> <p>1. Alcohol abuse, multiple convictions involving alcohol (wet reckless and DUI)</p>	VIVEK	61054	SAN BERNARDINO	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GILL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	8/27/2014
<p>GONZALES-NATE</p> <p>1. Negligence/Incompetence in treating several patients,</p>	CARMEN	49248	SAN BERNARDINO	<p>TWO YEARS PROBATION WITH VARIOUS TERMS</p>	5/29/2015

repeated prescribed medications without getting proper history, performing physical examinations or tracking treatment efficacy				AND CONDITIONS.	
<p>GUPTA</p> <ol style="list-style-type: none"> 1. Negligence in treating patients without proper examinations or protocols before prescribing medication 2. Treating and prescribing controlled substances to family members and relatives 3. Failure to keep accurate records 4. Dishonesty relating to a domestic abuse incident involving parents 	KAJAL	92637	SAN BERNARDINO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS, TREATING ANY PATIENTS WITHOUT BEING PHYSICALLY PRESENT IN THE SAME VENUE AS THE PATIENT AND PRESCRIBING ANY CONTROLLED SUBSTANCE TO ANY FAMILY MEMBER OR OTHER RELATIVE.	9/12/2014
<p>KURTH</p> <ol style="list-style-type: none"> 1. Allowed physician assistants and unsupervised medical assistants to unlawfully, autonomously practice medicine and prescribe controlled substances 2. Dishonesty in cooperating with the investigation of his misconduct by the Board 3. Falsified records 	DONALD	43963	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE EXCEPT PATIENTS UNDERGOING DETOXIFICATION FROM DRUGS AND ALCOHOL ABUSE; SHALL NOT SUPERVISE, EMPLOY OR CONTRACT ANY PHYSICIAN ASSISTANT, NURSE PRACTITIONER OR MID-LEVEL PROVIDER FOR THE	3/30/2012

				PROVISION OF MEDICAL SERVICES. (SEE DECISION FOR MORE SPECIFIC DETAILS).	
LIZARRAGA 1. Negligence in treatment of many patients in failing to perform proper evaluations and deviating from standards of care 2. Over-prescription of medication 3. making false statements	JUAN	49181	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	12/6/2004
LIZARRAGA 1. Failure to comply with cost recovery of 2004 probation decision	JUAN	49181	SAN BERNARDINO	EFFECTIVE 06/14/04 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED. EFFECTIVE 08/15/07 NEW DECISION EXTENDS PROBATION TWO ADDITIONAL YEARS WITH VARIOUS TERMS AND CONDITIONS. ALL OTHER TERMS AND CONDITIONS OF THE 2004 DECISION CONTINUE TO APPLY. EFFECTIVE 10/28/11 NEW DECISION CONTINUES PROBATION UNTIL DR. LIZARRAGA REIMBURSES THE BOARD FOR OUTSTANDING COSTS. THE RESTRICTION PROHIBITING THE SUPERVISION OF PHYSICIAN	10/28/2011

				ASSISTANTS HAS BEEN RELIEVED. ALL OTHER TERMS AND CONDITIONS FROM THE 2004 AND 2007 DECISIONS CONTINUE TO APPLY.	
<p>MCCLUSKEY</p> <p>1. Medical license was on probation in the state of Oregon for unprofessional conduct regarding his management of a pain clinic, seeking to resume practice as anesthesiologist in CA</p>	EDWARD	70496	SAN BERNARDINO	EFFECTIVE 10/01/09 LICENSE SURRENDERED; EFFECTIVE 11/15/13 LICENSE REINSTATED; SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EVALUATING OR TREATING CHRONIC PAIN PATIENTS, SERVING AS THE MEDICAL DIRECTOR FOR A PAIN CLINIC AND MANAGING THE DELIVERY OF CARE TO CHRONIC PAIN PATIENTS.	11/15/2013
<p>REDDY</p> <p>1. License was revoked in 2001 following a criminal conviction and allegations of sexual misconduct with female patients; as of 2012, he has showed significant progress in rehabilitation and license was reinstated on a probationary period</p>	HARI	56371	SAN BERNARDINO	EFFECTIVE 05/23/03 LICENSE REVOKED; EFFECTIVE 03/23/12 LICENSE REINSTATED AND PLACED ON SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR	3/23/2012

				TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
REECE 1. Conviction of federal crime related to controlled substances, Pled guilty to conspiracy to distribute controlled substances	TYRON	31509	SAN BERNARDINO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 01/09/15 THROUGH 04/09/15. RESTRICTIONS: PROHIBITED FROM PRESCRIBING ANY CONTROLLED SUBSTANCES AND SUPERVISING PHYSICIAN ASSISTANTS.	12/24/2014
ROBLES 1. Alcohol abuse and DUI conviction	DAVID	105427	SAN BERNARDINO	FIFTY-NINE (59) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	8/24/2012
RUIZ 1. Negligence in care of patient and interpretation of test results resulting in patient death	CYNTHIA	48844	SAN BERNARDINO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	2/7/2014
RUNDALL 1. Negligence/incompetence in extreme departure from standard of care for multiple patients, failing to perform appropriate evaluations and improper admission to hospital	FRED	50482	SAN BERNARDINO	EFFECTIVE 12/31/13 CANNOT PRACTICE MEDICINE PENDING SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATIONAL PROGRAM. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RUNDALL IS PROHIBITED FROM SUPERVISING PHYSICIAN	12/31/2013

				ASSISTANTS.	
<p>TESSIER</p> <p>1. Alcohol abuse, unprofessional conduct and DUI conviction</p>	DERON	99173	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TESSIER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/31/2014
<p>WILLIAMS</p> <p>1. License was revoked in 2005 due to overprescription of drugs without proper evaluation, violation of federal drug statutes and prescribing to an addict. In 2014, showing significant progress in rehabilitation, license was reinstated with a probationary period</p>	ELSWORTH	24406	SAN BERNARDINO	EFFECTIVE 11/14/05 LICENSE SURRENDERED; EFFECTIVE 11/26/14 LICENSE REINSTATED; CANNOT PRACTICE MEDICINE UNTIL PASSING AN EXAMINATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM	11/26/2014

				ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 11/04/16 NEW DECISION EXTENDS PROBATION ONE YEAR WITH VARIOUS TERMS AND CONDITIONS. DR. WILLIAMS IS GIVEN ONE YEAR FROM THE EFFECTIVE DATE OF THE NEW DECISION TO PASS THE EXAMINATION.
TREUHERZ 1. Unprofessional conduct involving complaints regarding controlled substance prescriptions and management led to Florida Board of Medicine accepting voluntary relinquishment of license as disciplinary action. 2. New York State Board for Professional Medical Conduct revoked license to practice medicine in New York.	ROBERT	A44467	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II CONTROLLED SUBSTANCES, SHALL NOT ENGAGE IN THE PRACTICE OF PAIN MANAGEMENT, SHALL NOT TREAT OR PRESCRIBE TO PATIENTS FOR TREATMENT OF CHRONIC PAIN AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
RHEE 1. Performed surgery without surgical training or without certification of his facility 2. Did not follow safety measures/procedures 3. Inaccurate and inadequate record keeping 4. False and deceptive advertising 5. Unprofessional conduct in providing anesthesia care	JOON	A77852	SAN BERNARDINO	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RHEE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
ABILA 1. Unprofessional conduct - Convicted of a DUI	SOLOMON	A87755	SAN BERNARDINO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.
BRANDSTATER	CHERRY	G33366	SAN	THREE YEARS PROBATION WITH

<ol style="list-style-type: none"> 1. Controlled substance prescriptions without documenting risks/benefits – failure to maintain adequate records 2. Failure to perform adequate examinations; failure to use or document use of urine/blood screenings 3. Prescribing pain medication without first obtaining an adequate history 4. Overprescription of medication 5. Failed to refer or document referrals 			BERNARDINO	VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT AT BEAVER MEDICAL GROUP AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE
<p>MARINO</p> <ol style="list-style-type: none"> 1. Prescribed medication to fictitious people 2. Incomplete and inaccurate record keeping 3. Did not obtain adequate history 4. Inappropriate dosage of medication 	JEFFREY	G76914	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRESCRIBING TESTOSTERONE OR ANASTROZOLE AND SUPERVISING PHYSICIAN ASSISTANTS OUTSIDE OF THE HOSPITAL EMERGENCY ROOM SETTING.
<p>KAMEN</p> <ol style="list-style-type: none"> 1. Convicted of driving with a blood alcohol level of .08 or more 2. External monitoring and substance abuse recovery treatment are necessary to practice medicine safely 	CHARLES	A129006	SAN BERNARDINO	EFFECTIVE 08/19/16 CANNOT PRACTICE MEDICINE UNTIL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION. THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. KAMEN IS PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE.
<p>SHAH</p> <ol style="list-style-type: none"> 1. 2015 Medical Board probation for DUI 2. Failure to submit to biological fluid sampling 3. Failure to abstain from controlled substances 4. Failure to abstain from alcohol 	ANUP	A135157	SAN BERNARDINO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. EFFECTIVE 08/30/16 SUSPENSION SERVED. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR

				CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES.

PAIK 1. Sexual misconduct Touched patient's breasts – made inappropriate comment	PHILLIP	50381	SAN DIEGO	SEVEN YEARS PROBATION WITH TERMS AND CONDITIONS AND SIXTY DAYS ACTUAL SUSPENSION FROM 12/08/06-02/05/07. RESTRICTIONS: THIRD PARTY CHAPERONE REQUIRED, AND PROHIBITED FROM PERFORMING PUBIC HAIR TRANSPLANTS ON FEMALE PATIENTS.	11/22/20
THOTA 1. Excessive prescribing of controlled substances – lack of proper judgment	NAGA	53526	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION BEGINS 03/18/16 UNTIL 04/16/16. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT FOR THOSE DRUGS LISTED IN SCHEDULES IV AND V. DR. THOTA SHALL BE SUBJECT TO THIS RESTRICTION UNTIL HE COMPLETES A PRESCRIBING COURSE.	3/2/201
YANG 1. Excessive prescribing of controlled substances – lack of proper judgment	THERESE	64469	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS AND/OR ANY OTHER LICENSED MEDICAL STAFF, INCLUDING NURSE PRACTITIONERS, REGISTERED NURSES, AND LICENSED VOCATIONAL NURSES.	4/16/20
BANIADAM 1. Fraudulent medical records,	BEHZAD	55698	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BANIADAM IS PROHIBITED FROM SUPERVISING	3/17/20

incompetence				PHYSICIAN ASSISTANTS.	
BANNACH 1. Negligence – failed to properly treat patients	MICHAEL	60021	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	4/2/2011
SADEGHI 1. Negligence in care for patients	HOSSEIN	60751	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SADEGHI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/4/2011
DUCK 1. Negligence & incompetence – one of his patients died	CRAIG	61484	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DUCK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/8/2011
NAWROSKI-WOZNIAK 1. Negligence in care for patient 2. dishonesty, creating false medical records	JOANNA	39627	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	8/15/2011
DANQUE 1. Negligence re: prescribing opiates	FLORA	62874	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	6/6/2011
LENZ 1. Negligence in care of a patient 2. repeat DUI convictions	HEINZ	45401	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. LENZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/30/2011
HERNANDEZ-RIVERA 1. Sexual misconduct in exam room with female patient	JOSE-DANIEL	80166	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 03/17/2011 TO 06/14/2011. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING ALL FEMALE PATIENTS AND IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/17/2011

DENNIS 1. Negligence, incompetence, dishonesty, at least one patient died	NILOUFER	101524	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING ANY SURGICAL PROCEDURES, EXCEPT ROUTINE BIOPSIES, BEING AN ON-CALL OR EMERGENCY PHYSICIAN ON DUTY AND SUPERVISING PHYSICIAN ASSISTANTS.	10/28/20
VAN 1. Repeat DUI offender 2. Arrested for possession of mushrooms while entering concert, violating terms of probation.	MARCUS	83208	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/30/20
HESS 1. Repeat DUI offender	JASON	104343	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HESS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/27/20
KUEMMERLE 1. Sold controlled substances online and sold fake prescriptions – arrested by DEA – convicted and served prison time.	NATHAN	89368	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND ONE YEAR ACTUAL SUSPENSION. SUSPENSION SERVED 02/17/13 UNTIL 02/17/2014. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISE PHYSICIAN ASSISTANTS, SHALL NOT ORDER, PRESCRIBE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES AND NOT ISSUE AN ORAL OR WRITTEN MEDICAL MARIJUANA RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER.	2/1/201
HIRST 1. Convicted of felonies relating to writing fake prescriptions to herself for her hydrocodone addiction	KATHRYN	95063	SAN DIEGO	EFFECTIVE 04/28/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PERMITTED TO PRESCRIBE, ADMINISTER, DISPENSE AND ORDER CONTROLLED SUBSTANCES LISTED IN SCHEDULE V ONLY, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	4/28/20

ABRAMOWITZ 1. Negligence – excessive prescribing of opiates and other controlled substances, failing to examine patients	JOSEPH	43166	SAN DIEGO	EFFECTIVE 02/13/2015 CANNOT PRACTICE MEDICINE UNTIL HE SURRENDERS HIS DEA PERMIT TO THE DRUG ENFORCEMENT ADMINISTRATION FOR CANCELLATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINSTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/13/20
KADESKY 1. Negligence in care for patient	YALE	50002	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.	2/11/20
BRYSK 1. Was accused of medical fraud – case was later dropped	MARCEL	32654	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 12/11/13 UNTIL 01/10/14. DURING PROBATION, DR. BRYSK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/25/2
ODOM 1. Pending prescription related med board case in Alaska	DAVID	33440	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	8/28/20
JUAREZ-URIBE 1. After treating patient in the ER, later paid her on several occasions to have sex with him and his wife	JOEL	40571	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: MUST HAVE THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/24/20

NEWSOME 1. Excessive and inappropriate prescribing of controlled substances 2. Created false documents / alteration of records	LARS	42281	SAN DIEGO	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III, EXCEPT IN HOSPITAL, SURGICAL CENTER, AND PLASTIC SURGERY OFFICE SETTINGS, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM PRACTICING OUTPATIENT PAIN MANAGEMENT AND SUPERVISING PHYSICIAN ASSISTANTS.	12/18/20
BRAUN 1. Excessive and inappropriate prescribing	JUDITH	26720	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 03/02/13 UNTIL 04/02/13. DURING PROBATION, DR. BRAUN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/14/20
RIOS 1. Insurance and medical fraud – felony convictions of grand theft 2. Also illegally possessed firearms	FELICIANO	33272	SAN DIEGO	EFFECTIVE 09/15/2011 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/30/2011 THROUGH 12/30/2011. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	9/15/20
SCHNEIDER 1. Had sex and relationship with his plastic surgery patient	GERALD	33567	SAN DIEGO	EFFECTIVE 09/26/13 CANNOT PRACTICE MEDICINE PENDING PASSING AN EVALUATION. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/12/13 THROUGH 1/10/14. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/26/20
HARARI 1. Negligence in care for patient	DAVID	50027	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HARARI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/9/201

GUTNER 1. Arrested for domestic battery	KIM	59083	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GUTNER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/22/20
STERNER 1. Negligence in how he discussed and billed patients for medical marijuana	ROBERT	51708	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FIFTEEN DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 07/27/09 TO 08/11/09. DURING PROBATION, DR. STERNER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	6/12/20
CHAO 1. Repeat DUIs and negligence in patient care	DAVID	78677	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CHAO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/25/20
GERBER 1. Arrested for illegal drugs in Winnebago while driving on trip with friends	BRET	79213	SAN DIEGO	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GERBER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	8/27/20
SCOTT 1. Negligence – fetus died	ELIZABETH	80019	SAN DIEGO	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SCOTT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/21/20
ANDERSON 1. Had sex and sexual relationship with his psychiatry patient	DANIEL	64471	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ANDERSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/4/201
POWERS 1. Negligence in care of patient 2. On probation previously for pimping, sex with patient and inappropriate prescribing	JAMES	56299	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. POWERS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/3/201
SMILEY 1. Removed wrong kidney from	DANIEL	74108	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SMILEY IS PROHIBITED FROM SUPERVISING	7/26/20

patient				PHYSICIAN ASSISTANTS.	
<p>MURPHY</p> <ol style="list-style-type: none"> 1. Negligence in patient care 2. falsifying records to conceal using wrong limb for surgery 	MARY	74754	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY DAYS ACTUAL SUSPENSION TO BE SERVED BY 09/24/2011. RESTRICTIONS: SHALL NOT PRACTICE MEDICINE IN THE AREA OF INTRA-ABDOMINAL SURGERY UNTIL COMPLETION OF A CLINICAL TRAINING PROGRAM AND IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/27/20
<p>VAPNEK</p> <ol style="list-style-type: none"> 1. Removed wrong kidney from patient 	EVAN	75357	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VAPNEK IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/13/20
<p>FOSTER</p> <ol style="list-style-type: none"> 1. Incomplete records 2. Failure to record patient history 3. Prescription mismanagement 4. Failed to monitor patient 	ROBERT	G56132	SAN DIEGO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FOSTER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
<p>SIDRANSKY</p> <ol style="list-style-type: none"> 1. Alcohol and substance abuse 2. Self-prescribed medications 3. Suffers from mental illnesses that impact ability to engage in practice of medicine 	RODNEY	A78625	SAN DIEGO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	
<p>ANTKOWIAK</p> <ol style="list-style-type: none"> 1. Failure to recognize and reconcile complaints brought by patient's daughter and nursing staff 2. Failure to alleviate patient's pain and suffering at the end of her life 3. Missing and 	GREGORY	A78990	SAN DIEGO	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	

<p>inadequate patient records</p> <p>4. Gross negligence – doctor stated patient was not under his care yet he signed multiple orders for patient</p> <p>5. Failed to see patients</p>				
<p>VAN</p> <p>1. Two DUI convictions</p> <p>2. Failed to submit biological fluid samples; Failed to pay probation monitoring costs</p> <p>3. Charged with possession of a dangerous drug/controlled substance</p>	MARCUS	A83208	SAN DIEGO	EFFECTIVE 12/09/16 CANNOT PRACTICE MEDICINE UNTIL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
<p>HIRST</p> <p>1. Two felony convictions - Took someone else's prescription pad and wrote prescriptions for personal use - Wrote fraudulent prescriptions</p> <p>2. Engaged in acts of dishonesty or corruption</p> <p>3. Engaged in unethical conduct as a medical professional</p>	KATHRYN	A95063	SAN DIEGO	EFFECTIVE 04/28/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PERMITTED TO PRESCRIBE, ADMINISTER, DISPENSE AND ORDER CONTROLLED SUBSTANCES LISTED IN SCHEDULE ONLY, PROHIBITED FROM ENGAGING IN THE SOL PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.
<p>BUCHNER</p> <p>1. Convicted of driving with a blood alcohol level of .08 percent or more; multiple arrests related to alcohol</p>	WILLIAM	A109750	SAN DIEGO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BUCHNER PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

<p>GHABRA</p> <ol style="list-style-type: none"> 1. License revoked in 1993 due to battery/sexual abuse 2. Petition to reinstate license denied in 1996 3. License reinstated in 2016 – with stipulations of training, psychiatry, psychotherapy, professional boundaries program, ethics course, chaperone, and notify of decision all facilities where doctor will practice 	<p>ZIYAD</p>	<p>C40841</p>	<p>SAN DIEGO</p>	<p>EFFECTIVE 05/28/93 LICENSE REVOKED; EFFECTIVE 12/02/16 LICENSE REINSTATED AND PLACED ON SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM AND MUST PASS AN EVALUATION. RESTRICTIONS: PROHIBIT FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.</p>
<p>NAVARRETE</p> <ol style="list-style-type: none"> 1. Incomplete or inadequate records – incomplete chart notes - Failed to document patient's admittance to sharing pills with her husband - Failed to perform and document reviews of treatment of patient 2. Prescribed medications incorrectly and excessively 3. Failed to monitor patient's use of controlled substance 4. Continued to prescribe controlled substances after patient divulged she was sharing 	<p>ROMMEL</p>	<p>G81687</p>	<p>SAN DIEGO</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE DRUGS LISTED IN SCHEDULES IV AND V AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>

<p>medication with her husband</p> <p>5. Prescribed medication for a patient with back pain without performing an exam of back</p> <p>6. Did not counsel patient on safe use of pain medications</p>				
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<p>BARRY</p> <p>1. Repeat DUIs</p> <p>2. Crashed into other cars causing injury</p>	MICHELLE	85355	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BARRY IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/9/2015
<p>DEICKEN</p> <p>1. Inappropriate opiate prescribing to multiple patients</p>	RAYMOND	56007	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 01/21/12 UNTIL 03/21/12. DURING PROBATION, DR. DEICKEN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/5/2012
<p>DIAB</p> <p>1. Sex / affair with patient</p>	MOHAMMAD	86439	SAN FRANCISCO	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 12/01/13 UNTIL 01/29/14. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING ALL PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/1/2013
<p>GAYNOR</p> <p>1. Punctured patient's eyeball during a permanent makeup procedure causing patient to become</p>	ALAN	33877	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GAYNOR IS PROHIBITED FROM PRACTICING COSMETIC SURGERY UNTIL HE SUCCESSFULLY COMPLETES	11/4/1998

nearly blind.				A CLINICAL TRAINING PROGRAM AND PASSES AN EXAMINATION.	
MOORES 1. Heart surgeon - Negligent care of multiple patients leading one to die.	WILLIAM	28505	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: MUST HAVE A PROCTOR PRESENT WHEN PERFORMING ANY SURGICAL PROCEDURE AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/2/2001
RUST 1. Repeat DUI offender	GARY	84324	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	1/17/2014
TZENG 1. Negligent care of multiple patients including IUD hook removal / exploration of a patient who was unknowingly 7 weeks pregnant.	YINN	60257	SAN FRANCISCO	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND AS LONG AS DR. TZENG PRACTICES WITHIN THE KAISER SYSTEM, SHE IS PROHIBITED FROM PERFORMING SURGICAL PROCEDURES, EXCEPT FOR AMBULATORY, OFFICE BASED GYNECOLOGIC PROCEDURES THAT USE LOCAL ANESTHESIA.	7/13/2012
GRINBERG 1. Kept increasing various prescriptions for patient with history of cocaine and other controlled substance and Rx abuse problems despite hospital orders not to after her release due to a stroke. 2. Excessive and inappropriate prescribing to	ALEXANDER	A56467	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GRINBERG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	

multiple patients				
FRANZ 1. Did not document proscriptions he continued to provide to a patient who had moved to Costa Rica 2. Failed to meet in person with patient while treating her for seizures and other conditions	JEROME	G38039	SAN FRANCISCO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FRANZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
SVENSSON 1. Inappropriate and excessive prescribing to patients 2. Allowed unlicensed interns to see patients and fill out prescriptions – unlicensed practice of medicine.	TRAVIS	G80502	SAN FRANCISCO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SVENSSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, NURSE PRACTITIONERS AND MARRIAGE AND FAMILY THERAPIST INTERNS.

BODEPUDI 1. Gross negligence in patient care, failing to properly assess psychosis in multiple patients and manage interaction of medication; 2. Failure to record and assess history of alcohol/substance abuse in multiple patients	ARUDRA	73676	SAN JOAQUIN	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BODEPUDI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/16/2012
HICKOX 1. Used intoxicating substances (inhalants) and engaged in sexual acts while on-call at a hospital	PETER	86782	SAN JOAQUIN	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	12/28/2012
MOHAN 1. DUI conviction and alcohol abuse	DEEPAK	85611	SAN JOAQUIN	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR.	10/31/2014

				MOHAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
SABINO 1. Medical license suspended in Ohio for substance abuse and inappropriately obtaining medication for self-use	ALAN	77362	SAN JOAQUIN	EFFECTIVE 09/28/12 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 02/14/2014 NEW DECISION ADDS ONE YEAR TO THE CURRENT PROBATION TERM.	2/14/2014
SAETRUM 1. Wrote prescriptions for narcotics in the name of fictional patients for personal use	BRENT	64189	SAN JOAQUIN	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 01/30/14 UNTIL 04/01/14. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	5/8/2013
TZENG 1. Negligence in patient care, delaying performing a c-section despite signs that called for it resulting in infant death	YU-YEA	68367	SAN JOAQUIN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. TZENG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	12/20/2013
ZARATE 1. Negligence in care of multiple patients, failing to keep accurate records and perform comprehensive evaluations; overprescription	ENRIQUE	41534	SAN JOAQUIN	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ZARATE IS PROHIBITED	9/25/2014

of pharmaceuticals				FROM SUPERVISING PHYSICIAN ASSISTANTS OTHER THAN MONICA GLEASON, PAUL ANDERSON AND KEVIN BIXEL AT THE TURLOCK EXPRESS LANE URGENT CARE.
BODEPUDI <i>See above for initial probation decision</i> 1. Gross negligence and unprofessional conduct in failing to keep adequate records, failing to inform patients of costs and procedures and pressuring patients to pay for unnecessary visits	ARUDRA	A73676	SAN JOAQUIN	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BODEPUDI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
BARBER 1. DUI conviction and alcohol abuse	CHRISTINE	G80056	SAN JOAQUIN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.
FILLMORE 1. Negligence in patient care, failing to perform adequate assessment of symptoms and patient history and recommending surgery in a radical departure from standards of care; failure to maintain adequate records	KIMBERLEY	G74184	SAN JOAQUIN	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FILLMORE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

ADYA 1. Unprofessional conduct 2. Using a concealed camera to secretly videotape women 3. Practice impaired due to mental illness	NAVNEET	51409	SAN LUIS OBISPO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING WITH, EXAMINING, OR TREATING FEMALE PATIENTS, PROHIBITED FROM ENGAGING IN THE PRACTICE OF MEDICINE OUTSIDE OF AN OFFICE, HOSPITAL OR CLINICAL SETTING & SHALL NOT PROVIDE MEDICAL SERVICES IN A PATIENT'S HOME AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/16/2011
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HAM 1. Failure to report felony convictions 2. Knowingly and willfully making a false statement to the DEA 3. Dispensing controlled substances	JOHNNIE	90443	SAN LUIS OBISPO	TEN YEARS PROBATION WITH VARIOUS TERMS & CONDITIONS & SIXTY DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 06/15/08 TO 08/13/08. DURING PROBATION, DR. HAM IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/30/2008
HJORTSVANG 1. Gross negligence & incompetence 2. Failed to adequately monitor a patient 3. Failed to learn/understand a drug protocol he was unfamiliar with	ERICK	79589	SAN LUIS OBISPO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	10/30/2013
REES 1. Gross negligence 2. Offered rebates for patient referrals 3. No vital signs or medical history documented during exam 4. Falsified medical record in support of medical marijuana recco	ATSUKO	41745	SAN LUIS OBISPO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 06/02/13 - 07/17/13. DURING PROBATION, DR. REES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	5/17/2013
REMIS 1. Gross negligence and incompetence 2. Inadequate medical records 3. Failed to establish and maintain professional boundaries	PAUL	24123	SAN LUIS OBISPO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. REMIS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/12/2014
SNYDER 1. Mental and physical impairment affecting competency 2. Used drugs for purposes other than they were medically indicated	PATRICIA	44222	SAN LUIS OBISPO	EFFECTIVE 06/10/16 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PRACTICING EMERGENCY ROOM MEDICINE AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE. EFFECTIVE 08/11/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE.	1/13/2016

<p>BULLOCK</p> <ol style="list-style-type: none"> Sex with patient Inappropriate prescribing 	<p>PETER</p>	<p>31093</p>	<p>SAN MATEO</p>	<p>SIX YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND FORTY-FIVE (45) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 11/30/14 THROUGH 01/14/15. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS.</p>	<p>11/14/2014</p>
<p>GAGGERO</p> <ol style="list-style-type: none"> Repeat DUI – crashed into vehicles and fire hydrants and kept driving 	<p>DWIGHT</p>	<p>58937</p>	<p>SAN MATEO</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GAGGERO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT WHEN PRACTICING EMERGENCY MEDICINE IN A HOSPITAL SETTING.</p>	<p>8/16/2013</p>
<p>KIM</p> <ol style="list-style-type: none"> False representations to federal law enforcement officials re: Pharmacom job investigation Made numerous inappropriate sexual advances toward female patient who worked at Hooters during his time working at Evergreen Valley College in San Jose Was not truthful with investigators when confronted with his behavior towards the female patient 	<p>STEVEN</p>	<p>69347</p>	<p>SAN MATEO</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>7/10/2014</p>

LIU 1. Sex with patient 2. Fraudulent alteration of medical records	SAMANTHA	77884	SAN MATEO	EFFECTIVE 04/09/07 LICENSE REVOKED; EFFECTIVE 12/18/15 LICENSE REINSTATED AND PLACED ON SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	12/18/2015
MADAN 1. Improper treatment and oversight of several patients at Re:Juvenate 2. False advertising	SHERNA	43846	SAN MATEO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM EITHER PRACTICING AESTHETIC MEDICINE OR PERFORMING COSMETIC PROCEDURES AND SUPERVISING PHYSICIAN ASSISTANTS.	7/6/2011
MCCOURT 1. Not releasing medical records of juveniles re: vaccines	KATHY	46539	SAN MATEO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	10/5/2001
OSIAS 1. Obtained fictitious name permit for University Mission Medical Clinic 2. Opened unaccredited outpatient setting 3. Did not have malpractice insurance 4. Caused severe liposuction deformities and issues with multiple patients	JOELLE	80476	SAN MATEO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING ANY AND ALL COSMETIC SURGERIES, PROHIBITED FROM PERFORMING ANY AND ALL SURGERIES OUTSIDE OF A HOSPITAL SETTING AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, EXCEPT WHEN DR. OSIAS IS PRACTICING OBSTETRICS AND GYNECOLOGY IN A HOSPITAL SETTING OR ANOTHER SETTING SO LONG AS THE PHYSICIAN ASSISTANT IS UNDER THE SUPERVISION OF ANOTHER PHYSICIAN.	1/2/2013

<p>BARTOLINI</p> <ol style="list-style-type: none"> 1. Self prescribing fraudulently using other doctor's forged signatures 2. Wrote prescriptions to fictitious patients for her personal use 	<p>SUSAN</p>	<p>98927</p>	<p>SANTA BARBARA</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES WITHIN THE DRUG CLASSES OF OPIATES, BENZODIAZEPINES AND SEDATIVE/HYPNOTIC DRUGS AND ANY GENERIC OR BRAND NAME FORM OF PERCOCET, AMBIEN, VALIUM AND VICODIN, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSE AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>8/21/2015</p>
<p>THIENE</p> <ol style="list-style-type: none"> 1. DUI 	<p>PAMELA</p>	<p>68347</p>	<p>SANTA BARBARA</p>	<p>FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>9/2/2015</p>

<p>PAULE</p> <ol style="list-style-type: none"> 1. Excessive and inappropriate prescribing of controlled substances to multiple patients 	<p>WILLIAM</p>	<p>84131</p>	<p>SANTA BARBARA</p>	<p>FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL NOT ORDER, RECOMMEND, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCE LISTED IN SCHEDULE II FOR THE FIRST TWO YEARS OF PROBATION OR UNTIL SUCCESSFUL COMPLETION OF PRESCRIBING PRACTICE AND RECORD KEEPING COURSES, WHICHEVER IS LATER.</p>	<p>4/8/2016</p>
<p>MAZER</p> <ol style="list-style-type: none"> 1. Inappropriate acts and prescriptions for minors 2. Sexual relations with a patient 	<p>NEAL</p>	<p>86314</p>	<p>SANTA BARBARA</p>	<p>EFFECTIVE 10/24/10 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 11/01/13 NEW DECISION EXTENDS PROBATION THREE YEARS. DURING PROBATION, DR. MAZER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>11/1/2013</p>
<p>GAROFALO</p> <ol style="list-style-type: none"> 1. Incomplete and disorganized medical records 2. Prescription documentation incomplete 3. Examination and treatment assessments inadequate 	<p>JOANNE</p>	<p>A28842</p>	<p>SANTA BARBARA</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.</p>	

DYNE 1. Gross negligence 2. Over prescription of opiates 3. Failure to maintain adequate and accurate records	GODFREY	A43164	SANTA BARBARA	THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DYNE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
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AGUILAR 1. 37 year old married man Dr with three kids had sex with 18 year old female patient / intern.	CHRISTOPHER	83131	SANTA CLARA	EFFECTIVE 06/19/07 LICENSE SURRENDERED; EFFECTIVE 09/09/11 LICENSE REINSTATED; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND MUST HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING OR TREATING TEENAGE FEMALE PATIENTS.	9/9/2011
BERGER-DUJMOVIC 1. Diagnosed miscarriage without proper exams and ordered prescriptions so the patient could deliver the miscarried fetus. Patient took the prescriptions and delivered a living fetus – paramedics tried to resuscitate fetus but were not successful.	CATHERINE	80123	SANTA CLARA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	4/5/2013
CHO 1. Did not properly treat three patients and medical record issues	KISUK	51445	SANTA CLARA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CHO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/13/2014
DU 1. Negligence in care of multiple senior patients	LEE	73859	SANTA CLARA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. DU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/4/2016

HARISH 1. Alcoholism caused license probation in West Virginia – CA probation for continued monitoring.	GORLI	41095	SANTA CLARA	EFFECTIVE 10/21/10 CANNOT PRACTICE MEDICINE PENDING PASSING AN EXAMINATION OR COMPLETION OF A PHYSICIAN ASSESSMENT THROUGH THE PHYSICIAN ASSESSMENT AND CLINICAL EDUCATION PROGRAM (PACE). ONE YEAR PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HARISH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	10/21/2010
HLAVA 1. Gross negligence – used controlled substances while working as an anesthesiologist during surgical procedures.	NICOLE	87960	SANTA CLARA	EFFECTIVE 08/27/15 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 01/14/16 CEASE PRACTICE ORDER ISSUED- NO PRACTICE BEGINS 01/17/16.	1/14/2016
HUTCHINS 1. Excessive prescribing of controlled substances to multiple patients.	MARY	50634	SANTA CLARA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HUTCHINS IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/12/2016
MADANAHALLI 1. DUI and alcoholism – her son made a 911 call as she was driving drunk while transporting 6 kids home from school.	MALINI	63947	SANTA CLARA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. MADANAHALLI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/20/2015
MOAYED 1. Shoplifting and mental impairment / breakdown	SEPIDEH	77967	SANTA CLARA	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE	7/24/2015

				AND SUPERVISING PHYSICIAN ASSISTANTS.	
REBONG 1. Convicted of unlicensed practice of medicine – allowed two unlicensed persons to perform hair removal and skin rejuvenation on multiple patients	KENNETH	45813	SANTA CLARA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING COSMETIC LASER PROCEDURES AND SUPERVISING PHYSICIAN ASSISTANTS.	10/9/2015
STUBBLEFIELD 1. Excessive prescribing and inadequate care of patient	MATTHEW	72442	SANTA CLARA	TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. STUBBLEFIELD IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/20/2015
ZIKRIA 1. Patient died – did not perform proper tests before surgery	GUL	54355	SANTA CLARA	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND SHALL PERFORM SURGICAL PROCEDURES ONLY IN ACCREDITED FACILITIES AND SHALL UTILIZE THE SERVICES OF A BOARD CERTIFIED ANESTHESIOLOGIST IN ANY PROCEDURE UTILIZING OTHER THAN LOCAL ANESTHESIA OR NERVE BLOCKS.	4/25/2014
FORRESTER 1. Colorado med board took action against license for DUI conviction and admission of alcohol abuse	JOSEPH	A122002	SANTA CLARA	FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. FORRESTER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
SEGAL 1. Inappropriate and excessive prescribing to patient – didn't check CURES to find out that patient was getting RXs from other doctors – never did exams to	PERRY	C39242	SANTA CLARA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT PRESCRIBE FOR CHRONIC PAIN MANAGEMENT, NOT PRESCRIBE OPIATES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	

determine if she needed the meds.				
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HUERTA-IBARRA 1. Gross negligence during surgery which resulted in a patient's death.	JOSE	94115	SANTA CRUZ	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HUERTA-IBARRA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/21/2011
KENNY 1. Acts of domestic violence towards her boyfriend. 2. Questionable mental stability.	KATHERINE	105752	SANTA CRUZ	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	3/7/2013
RESNECKSANNES 1. Gross negligence with a recorded 13 patients. 2. Multiple inadequate documentations of patients' records.	LARRY	25952	SANTA CRUZ	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM TREATING CHLAMYDIA PNEUMONIAE INFECTION AND CHRONIC HUMAN HERPES VIRUS 6 AND WILL REFER SUCH PATIENTS TO A SPECIALIST, TREATING ANY PATIENT BY INTRAVENOUS ANTIBIOTICS AND ANTIVIRAL AGENTS AND INTRAMUSCULAR INJECTIONS OF ANTIBIOTICS AND ANTIVIRALS, WILL NOT PLACE OR USE A PICC LINE WITH ANY PATIENT AND SUPERVISING PHYSICIAN ASSISTANTS.	11/6/2015
RODRIGUEZ 1. Excessive and inappropriate prescribing 2. Negligent care of patients 3. Not using CURES to see drug abuse patterns	ELIAS	77669	SANTA CRUZ	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. RODRIGUEZ IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	4/2/2015

SOLINAS	JEFFREY	43136	SANTA CRUZ	FIVE YEARS PROBATION WITH TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION FOR POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	11/9/2012
1. Prescribing controlled substances to a known addict rather than for a medical purpose. 2. Prescribing excessive amounts of opiates to a patient without medical documentation. 3. Several accounts of neglecting to refer patients to proper/timely care.					
ZINNANTI	WILLIAM	118089	SANTA CRUZ	EFFECTIVE 01/10/14 CANNOT PRACTICE MEDICINE UNTIL SUCCESSFUL COMPLETION OF A CLINICAL TRAINING OR EDUCATION PROGRAM. SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ZINNANTI IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/10/2014
1. Introducing an adulterated medical device into interstate commerce, that resulted in a felony violation.					
HUERTA-IBARRA	JOSE	A94115	SANTA CRUZ	EFFECTIVE 07/21/11 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 09/21/16 NEW DECISION THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS SHALL BE CONSECUTIVE TO ANY PROBATION REMAINING IN CURRENT PROBATION TERM. DURING PROBATION, DR. HUERTA-IBARRA IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
1. Prescribing medication without proper medical examination to several patients.					
HSU	CARMEN	G83166	SANTA CRUZ	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HSU IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	
1. Driving under the influence of alcohol - DUI					

BERNSTEIN	LOUIS	22023	SHASTA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. BERNSTEIN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/3/2014
1. Texas Board revoked license for unprofessional behavior towards patients and staff 2. Misdemeanor conviction for being in possession of marijuana					

<p>BRUSETT</p> <ol style="list-style-type: none"> 1. Operated with insufficient evidence - coronary artery bypass graft surgery 2. Violated standards of care - performed “prophylactic” coronary artery bypass surgery – did not using LIMA artery - 3. Didn’t adequately evaluate patient before surgery 4. Performed surgery unnecessarily – completed 5 bypasses when only 2 were medically indicated 5. Failed to seek intervention (stenting) instead coronary artery bypass surgery 	KENT	86006	SHASTA	<p>EIGHT YEARS PROBATION WITH VARIOUS TERMS & CONDITIONS & 120 DAYS ACTUAL SUSPENSION. SUSPENSION SERVED AND COMPLETED ON 12/24/08. DURING PROBATION, DR. BRUSETT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	8/27/2008
<p>MORGAN</p> <ol style="list-style-type: none"> 1. Arrested multiple times for public intoxication and DUI 	CHADWICK	75644	SHASTA	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND NINETY (90) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/6/13 THROUGH 1/4/14. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS AND ENGAGING IN THE SOLO PRACTICE OF MEDICINE.</p>	9/20/2013
<p>PYLE</p> <ol style="list-style-type: none"> 1. Sexual misconduct with a patient – kissed patient on the lips 2. Unprofessional conduct – called patient and had conversation but did not document in patient’s file. 	LARRY	37880	SHASTA	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANT.</p>	6/11/2014
<p>PYLE</p> <ol style="list-style-type: none"> 1. Failed to obtain medical history – continued to prescribe medications without knowing why patient was on these meds 2. Mismanaged psychiatric care – failed to adequately treat patient 	LARRY	37880	SHASTA	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT</p>	2/11/2016

<p>– failed to refer patient to a psychiatrist in a timely fashion</p> <ol style="list-style-type: none"> 3. Failed to provide adequate follow up 4. Sexual misconduct – patient said doctor touched her multiple ways/places on her body 				<p>WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS, INCLUDING FEMALE MINOR PATIENTS AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	
<p>BRUSETT</p> <ol style="list-style-type: none"> 1. Failure to diagnose patient – performed right femoral to popliteal bypass instead of a right femoral artery exploration, patch angiography and complete angiography 2. Failure to adequately treat patient – did not recognize the signs of serious infection and did not remove patient’s graft which prolonged the infection and led to further hospital stays 	<p>KENT</p>	<p>G86006</p>	<p>SHASTA</p>	<p>EFFECTIVE 08/27/08 CASE NO. 02-2002-137566, EIGHT YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND 120 DAYS ACTUAL SUSPENSION. SUSPENSION SERVED. EFFECTIVE 09/09/16 NEW DECISION, TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS SHALL BE CONSECUTIVE TO THE CURRENT PROBATIONARY TERM. DURING PROBATION, DR. BRUSETT IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	
<p>GASMAN</p> <ol style="list-style-type: none"> 1. Failed to make accurate diagnosis – failed to appreciate degree of airway difficulty in preparation for administering amnesia – failed to promptly recognize or treat pulseless arrest 2. Failed to use proper equipment and to have proper equipment accessible 3. Failed to keep complete patient records – didn’t note all of patient’s diagnoses – did not record all medications given to patients – preoperative note was written and submitted after patient received IV sedation and note was signed after patient coded more than once – no summary note of code blue events or of patient’s death 4. Failed to adequately treat patient – gave patient doses of sedation without regard to patient’s history – did not take active role in reviving 	<p>MICHAEL</p>	<p>G67965</p>	<p>SHASTA</p>	<p>FOUR YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PROVIDING GENERAL ANESTHESIA IN ANY INPATIENT MEDICAL FACILITY AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	

<p>patient -- failed to properly adjust the mechanical ventilator after intubation and failed to proactively anticipate blood pressure increases and decreases in response to carotid de-clamping – did not use additional methods to manage intraoperative hypotension</p> <p>5. Failed to take complete patient histories – noted patient had had a C-section but put prior anesthetic as “none” – did not note everything patient suffered from – did not examine patient’s neck for tracheal deviation due to patient’s thyroid mass – did not document patient’s most recent lab work or comment on patient being hyponatremic</p> <p>6. Did not inform patients of risks</p> <p>7. Failure to examine heart and lungs of patients</p> <p>8. Incomplete charting – information left off patients’ charts – did not document patient’s last solid food intake or aspiration risk – did not include patient’s preoperative Doppler studies or her recent ECG – patient’s chart did not show the 10-minute period where patient’s systolic blood pressure was at 70</p>				
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<p>FORT</p> <ol style="list-style-type: none"> 1. Alcoholism 2. Sexual relationship with patient Janice V 3. Prescribed her dangerous drugs even though she was pregnant 	<p>GRADY</p>	<p>27353</p>	<p>SISKIYOU</p>	<p>SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND THIRTY (30) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 10/01/15 THROUGH 10/31/15. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER,</p>	<p>12/31/2015</p>
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<p>4. Had to resign from Shasta Community Health Center</p> <p>5. Excessive prescribing to a patient addicted to Rx – Dr continued to prescribe to patient even though he admitted to also selling the drugs illegally</p> <p>6. Excessive and inappropriate prescribing to multiple patients – one almost died</p>				<p>FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	
<p>GOODWIN</p> <p>1. Had a medical assistant in charge of elderly patient's infusion pump – accidentally overdosed patient who died</p>	<p>JEREMY</p>	<p>76323</p>	<p>SISKIYOU</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM USING MEDICAL ASSISTANTS TO REFILL INFUSION PUMPS WITH PRESCRIPTION PAIN MEDICATION, ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>9/3/2014</p>
<p>TRIBBLE</p> <p>1. Repeatedly tested positive for alcohol use during probation</p>	<p>JOHN</p>	<p>109949</p>	<p>SISKIYOU</p>	<p>EFFECTIVE 04/03/15 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>4/3/2015</p>

<p>CHEN</p> <ol style="list-style-type: none"> 1. Gross negligence and incompetence 2. Demonstrated lack of skill in performing a particular surgery 3. False and misleading info on his advertisements / website 	WILLIAM	42521	SOLANO	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM PERFORMING SURGERY OR TREATING PATIENTS FOR ANY CONDITION BELOW THE NECK, EXCEPT FOR SUPERFICIAL PROCEDURES AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 02/20/14 THE SUPERIOR COURT PARTIALLY STAYED THE PROHIBITED PRACTICE. DR. CHEN MAY NOT PERFORM BREAST REDUCTION SURGERY. ALL OTHER TERMS AND CONDITIONS STILL APPLY.</p>	9/5/2013
<p>NJOKU-ANIMASHAUN</p> <ol style="list-style-type: none"> 1. Department of US Air Force restricted privileges 2. Lack of professional knowledge and judgment 	ADAKU	123292	SOLANO	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND PRACTICING OBSTETRICS AND GYNECOLOGY.</p>	11/20/2015
<p>PARHAM</p> <p>Current revocation due to repeated negligent acts of 42 patients – failure to document history and physical examinations of patients. Served prior probation for:</p> <ol style="list-style-type: none"> 1. Soliciting and receiving personal loans from many patients 2. Failure to pay restitution to patients 	FRED	43938	SOLANO	<p>*license has been revoked*</p> <p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PARHAM IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	7/19/2013
<p>PATEL</p> <ol style="list-style-type: none"> 1. Neglect and incompetence 2. Medical charts do not include all drugs prescribed 3. Over prescription of opioids 	JAYESH	72056	SOLANO	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PATEL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	1/14/2015

STEMMER *1997 probation placed by US Army* 1. Failed to document patient histories and exams 2. Failed to exercise proper judgment in patient care	AUGUST	6854	SOLANO	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: CANNOT PRACTICE OTOLARYNGOLOGY AND MAXILLO-FACIAL SURGERY UNTIL PASSING AN EXAMINATION AND PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF COMPENSATION.	1/16/1997
ZIEROLD 1. Grossly negligent discharge of a firearm	DUSTIN	85833	SOLANO	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. ZIEROLD IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	2/7/2014

CARROLL 1. Prescribing prescriptions without documentation and proper medical assessments.	JAMES	25507	SONOMA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. CARROLL IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	3/25/2016
GULLION 1. Several accounts of sexual harassment towards a patient.	GUY	50284	SONOMA	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. GULLION IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	1/10/2014
O'DORISIO 1. Failure to report multiple patients' medical history. 2. Failed to properly diagnosis and analysis during a patient's post-surgery.	JAMES	44147	SONOMA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	11/2/2015

<p>STREUTKER</p> <ol style="list-style-type: none"> 1. Driving under the influence. 2. Possession of amphetamine, methamphetamine and other controlled substances without prescriptions. 	<p>ANTHONY</p>	<p>63917</p>	<p>SONOMA</p>	<p>EFFECTIVE 03/30/16 CANNOT PRACTICE MEDICINE UNTIL PASSING AN EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES II AND III, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>3/30/2016</p>
<p>VERDUCCI</p> <ol style="list-style-type: none"> 1. Multiple accounts of negligence with patients. 	<p>MONA</p>	<p>36379</p>	<p>SONOMA</p>	<p>EFFECTIVE 08/25/97 CANNOT PRACTICE OBSTETRICS UNTIL PASSING AN EXAMINATION; FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS.</p>	<p>8/25/1997</p>
<p>WHITE</p> <ol style="list-style-type: none"> 1. Inappropriate and unprofessional behavior with a patient – sexual misconduct with 20 year old patient – likely phone sex and inappropriate e-mails / texts. 	<p>DANIEL</p>	<p>59557</p>	<p>SONOMA</p>	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	<p>8/2/2012</p>
<p>GORDON</p> <ol style="list-style-type: none"> 1. Excessive and inappropriate prescriptions to patients – opioids, fentanyl – one who died. 	<p>ERIC</p>	<p>G82342</p>	<p>SONOMA</p>	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES AND SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY SCHEDULE II CONTROLLED SUBSTANCES UNTIL SUCCESSFUL COMPLETION OF A PRESCRIBING PRACTICE COURSE.</p>	

<p>ABADIR</p> <ol style="list-style-type: none"> 1. Arrested for false imprisonment, and malicious prevention with significant other. 2. Self-prescribed Norco, Valium and Ativan. 	MAHER	24538	STANISLAUS	<p>EFFECTIVE 11/15/12 CANNOT PRACTICE PENDING COMPLETION OF A CLINICAL TRAINING PROGRAM. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, ADMINISTER, OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULES IV AND V, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION FOR POSSESSION OR CULTIVATION OF MARIJUANA FOR MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	11/15/2012
<p>GOGNA</p> <ol style="list-style-type: none"> 1. Failed to properly assess multiple patients. 	RAVI	39659	STANISLAUS	<p>THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	8/29/2014
<p>HADWEH</p> <ol style="list-style-type: none"> 1. Failure to properly evaluate peripheral edema for a patient. 2. Misuse of injectable medications. 	YOUSSEF	74536	STANISLAUS	<p>TWO YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HADWEH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	1/14/2016

LIMON-OLIVARES 1. Aiding and abetting unlicensed person in the practice of medicine. 2. Failure to maintain adequate medical records for multiple patients.	JOSE	80753	STANISLAUS	FIVE YEARS PROBATION WITH SIXTY (60) DAYS ACTUAL SUSPENSION. SUSPENSION SERVED 07/22/2012 UNTIL 09/20/2012. DURING PROBATION, DR. LIMON-OLIVARES IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/6/2012
SHANKAR 1. Aiding and abetting unlicensed practice of medicine. 2. Prescribing dangerous drugs without prior medical examination.	PRITHVI	92177	STANISLAUS	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY HUMAN CHORIONIC GONADOTROPIN OR TESTOSTERONE, PROHIBITED FROM SUPERVISING ANY STRUCTURED DIET OR WEIGHT LOSS PROGRAM AND SUPERVISING PHYSICIAN ASSISTANTS.	9/4/2015

AFATO 1. Prescribing medications with without a medical assessment.	FAAFOUINA	76223	SUTTER	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.	11/26/2014
COTSIRILOS 1. Negligent care of seven patients. 2. Failure to document the severity of patients' mental health, order proper tests, provide rationale	PETER	66322	SUTTER	CASE NO. 02-2010-207588; THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. EFFECTIVE 11/18/16 NEW DECISION EXTENDS PROBATION TWO YEARS WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. COTSIRILOS IS PROHIBITED FROM SUPERVISING PHYSICIAN	3/14/2014

for prescriptions.				ASSISTANTS.	
NASEEM 1. Illegal possession of drugs which resulted in conviction.	SHAHZAD	75541	SUTTER	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT RECOMMEND MARIJUANA TO ANY PATIENT FOR ANY MEDICAL PURPOSE, OR EVALUATE ANY PATIENT FOR THE PURPOSE OF MAKING A MEDICAL MARIJUANA RECOMMENDATION AND PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	9/5/2014
PHILLIPS 1. Self-prescribed medications on numerous occasions. 1. Over \$80,000 dollars' worth of fraudulent billing to Medicare.	JEFFREY	64950	SUTTER	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS AND ACTUAL THIRTY (30) DAYS SUSPENSION. SUSPENSION SERVED 05/22/11 THROUGH 06/20/11.	5/6/2011
SINGH 1. Failed to recognize broad complex tachycardia in the patient'	DEVINDERJIT	52113	SUTTER	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SINGH IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.	7/25/2014

SHUBHAKAR 1. Negligent care of resident who was injured while at work – blunt trauma to stomach area – was pushed by another resident and fell on corner of couch – Dr. failed to properly evaluate patient, obtain surgical consultation, obtain investigatory workup. 2. Negligent care of 13 year old patient who had a broken hip – resulted in weeks of delays and pain. 3. Failed to complete clinical training program during probation.	S	33936	TULARE	EFFECTIVE 12/17/15 THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. SHUBHAKAR IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 06/22/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE BEGINS 06/25/16.	12/17/2015
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<p>RENWICK</p> <ol style="list-style-type: none"> 1. Not performing proper exams – inappropriate and excessive prescribing to patient with substance abuse problems 2. No pain management plans for patients 3. Negligent care of multiple patients 	KENNETH	G50654	TUOLUMNE	<p>FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE DRUGS LISTED IN SCHEDULES III AND IV, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	
<p>HOOPER</p> <ol style="list-style-type: none"> 1. performed no exam or medical history and just issued multiple prescriptions for controlled substances to multiple patients – one was an undercover agent 	TIMOTHY	55188	TUOLUMNE	<p>THIRTY-FIVE (35) MONTHS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. HOOPER IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.</p>	4/13/2016

<p>CONTRERAS</p> <ol style="list-style-type: none"> 1. Busted by DEA for excessive prescribing 2. Repeat violator – also put on probation in 1999 	VICTOR	52723	VENTURA	<p>TEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT THOSE LISTED IN SCHEDULES IV AND V, THIS EXCEPTION SHALL BE IN EFFECT ONLY IF THE UNITED STATES DRUG ENFORCEMENT AGENCY ISSUES A NEW DEA REGISTRATION, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR A CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM PRACTICING, PERFORMING, OR TREATING PATIENTS IN THE AREA OF PAIN MANAGEMENT AND SUPERVISING PHYSICIAN ASSISTANTS.</p>	
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HUFF 1. Arrested for excessive prescribing 2. Went to federal prison – got his license back	MICHAEL	34873	VENTURA	EFFECTIVE 08/01/07 LICENSE REVOKED; EFFECTIVE 06/06/13 LICENSE REINSTATED; CANNOT PRACTICE MEDICINE PENDING COMPLETION OF A CLINICAL TRAINING OR EDUCATIONAL PROGRAM. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS BEGINS 05/09/14. RESTRICTIONS: PARTIAL CONTROLLED SUBSTANCES RESTRICTION, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE, SUPERVISING PHYSICIAN ASSISTANTS AND FROM PRACTICING PAIN MANAGEMENT WHERE THE TREATMENT OF MODALITY INCLUDES ANY SCHEDULED DRUG.
SU 1. Gross negligence and incompetence in prescribing medication 2. Lack of knowledge in drug interactions 3. Failure to document vital information in medical record	WEIYANG	40181	VENTURA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS, SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH, OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT FOR THOSE LISTED IN SCHEDULES IV AND V, STIMULANTS AND TESTOSTERONE, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES.
VREEKE 1. Stole, used and administered controlled substances including morphine 2. Performed surgical procedures on patients while impaired	MARY	78457	VENTURA	SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES, EXCEPT WHEN WORKING IN A HOSPITAL SETTING, WORKING AS AN ANESTHESIOLOGIST AND MUST BE ENGAGED IN THE PERI-OPERATIVE OR PERI-PARTUM CARE OF PATIENTS, SHALL NOT ISSUE AN ORAL OR WRITTEN RECOMMENDATION OR APPROVAL TO A PATIENT OR CAREGIVER FOR THE POSSESSION OR CULTIVATION OF MARIJUANA FOR PERSONAL MEDICAL PURPOSES, PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS.
NELSON 1. Gross negligence 2. Failed to discuss opioid Dependence with patients 3. Excessive prescribing of narcotics	BRUCE	36931	VENTURA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION DR. NELSON IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.

CHANG 1. Got a DUI	SEAN	112950	VENTURA	FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION DR. CHANG IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
LOWE 1. Repeated negligence 2. Failed to get consent for controlled substances	DAVID	24041	VENTURA	THREE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION DR. LOWE IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
VIVIAN 1. Placed on probation for using controlled substances 2. Up for license revocation because he failed to comply with probation	MICHAEL	78890	VENTURA	EFFECTIVE 03/04/16 FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. VIVIAN IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 10/27/16 CEASE PRACTICE ORDER ISSUED-NO PRACTICE BEGINS 10/30/16.
SMYLE 1. Sexual misconduct 2. Sexual foot fetish 3. Placed women's feet in his groin area	BERNARD	54868	VENTURA	EFFECTIVE 09/30/09 SEVEN YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. RESTRICTIONS: SHALL HAVE A THIRD PARTY CHAPERONE PRESENT WHILE CONSULTING, EXAMINING OR TREATING FEMALE PATIENTS OR PATIENTS ACCOMPANIED BY A FEMALE DURING CONSULTATION, EXAMINATION OR TREATMENT; PROHIBITED FROM ENGAGING IN THE SOLO PRACTICE OF MEDICINE AND SUPERVISING PHYSICIAN ASSISTANTS. EFFECTIVE 11/15/13 NEW DECISION EXTENDS PROBATION FOR ONE YEAR SO THE TOTAL LENGTH OF PROBATION IS EIGHT YEARS FROM ORIGINAL ORDER EFFECTIVE DATE.
PERO 1. Convicted of multiple DUI's 2. License revocation pending due to failure to comply with probation	JAMES	70281	VENTURA	EFFECTIVE 09/28/16 CANNOT PRACTICE MEDICINE UNTIL COMPLETION OF A CLINICAL DIAGNOSTIC EVALUATION. FIVE YEARS PROBATION WITH VARIOUS TERMS AND CONDITIONS. DURING PROBATION, DR. PERO IS PROHIBITED FROM SUPERVISING PHYSICIAN ASSISTANTS.
KERR 1. Gross negligence, deviated from standard of care 2. Over	ANDREW	G51543	VENTURA	FOUR YEARS PROBATION WITH VARIOUS TERM CONDITIONS. RESTRICTIONS: SHALL NOT ISSUE OR WRITTEN RECOMMENDATION OR APPROVA PATIENT OR CAREGIVER FOR THE POSSESSION CULTIVATION OF MARIJUANA FOR PERSONAL M PURPOSES, PROHIBITED FROM SUPERVISING PH

<p>prescription of medications</p> <p>3. Prescribing without an exam</p>				<p>ASSISTANTS AND DURING THE FIRST YEAR OF PRACTICE DR. KERR SHALL NOT ORDER, PRESCRIBE, DISPENSE, ADMINISTER, FURNISH OR POSSESS ANY CONTROLLED SUBSTANCES LISTED IN SCHEDULE II, EXCEPT FOR ADDERALL.</p>
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